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UNITED STATES N.M. OIL CONS. COMMISSION  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
P.O. BOX 1980  
DOBBS, NEW MEXICO 88240

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

5. Lease Designation and Serial No.  
NM 86927

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No. LITTLE JACK  
30 FEDERAL # 2

9. API Well No.  
30-025-32481

10. Field and Pool, or Exploratory Area  
WEST TRISTE DRAW DELAW

11. County or Parish, State  
LEA, NM

CARL AREA  
SUBMIT IN TRIPLICATE

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
MERIDIAN OIL INC.

3. Address and Telephone No.  
P.O. Box 51810 Midland, TX 79710 915-688-6943

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
1980 ' FNL & 2310' FEL  
SEC. 30, T23S, R32E

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other SPUD AND SET SURF CSG

- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)  
4/29/94: SPUD. DRILL A 17 1/2" HOLE TO 602. RAN 14 JTS OF 13 3/8" 48# H-40 STC CSG AND SET AT 602. USED FOUR CENTRALIZERS. CMTED W/LEAD: 350 SXS 'C' + 4% GEL + 2% CACL2. TAIL W/200 SXS 'C' + 2% CACL2. CIRC. 139 SXS. WOC 12.5 HRS

14. I hereby certify that the foregoing is true and correct

Signed DONNA WILLIAMS Title PRODUCTION ASSISTANT

Date 6/6/94

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side