Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

M. OIL CONS. COMMISSION OF THE
M. OIL 1780
HOBBS, NEWset Bureau No. 1004-0135 Expires: March 31, 1993
Expires: March 31, 1993

NM12611

S ,	N Bringer Bur	cau No.	1004-01
	Expires:	March 3	1, 1993

•	Expires:	March 31,	1993
5.	Lease Designat	tion and Ser	ial No

6. If Indian, Allottee or Tribe Name

SUNDRY	NOTICES	AND REPOR	TS ON	WELLS		
Oo not use this form for pro	posals to dr	rill or to deep	en or re	entry to a	different res	servo
Use "APPL	ICATION FO	OR PERMIT -	for su	ich proposa	als	

• •	PERMIT - " for such proposals	
SUBMIT	IN TRIPLICATE	7. If Unit or CA, Agreement Designation
1. Type of Well X Oil Well Gas Well Other 2. Name of Operator MERIDIAN OIL INC. 3. Address and Telephone No.		8. Well Name and No. Myers B 3 9. API Well No. 30 - 025 - 09565
P.O. Box 51810, Midland, TX 79710-1810 915-688-6943 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec. 13, T24S, R36E		10. Field and Pool, or exploratory Area
660' FNL & 1980' FWL		11. County or Parish, State LEA NM
12. CHECK APPROPRIATE BOX(s	TO INDICATE NATURE OF NOTICE, REPORT	, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	

Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
Subsequent Report Final Abandonment Notice	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
	Altering Casing	Conversion to Injection
	X Other STATUS	Dispose Water
		(Note: Report results of multiple completion on Wel Completion or Recompletion Report and Log form:
13. Describe Proposed or Completed Operations (Clearly state al	l pertinent details, and give pertinent dates, including estimated date of starti	ng any proposed work. If well is directionally dri

This well is currently producing as of March 1995. It came on @ 0 oil, 43 gas, and 0 water. The last test date of June 21, 1995, showed it had dropped to 0 oil, 5 gas, and 0 water.

	J. Ja za	The h of the h
14. I hereby certify that the foregoing is true and correct Signed	Title REGULATORY ASSISTANT	_{Date} 7/5/95
(This space for Federal or State office use) Approved by Conditions of approval, if any:	Title	Date

give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*