Form 3160-5

UNITED STATES

| FORM Bud AFB | APE | ROYI | 207.40 304-0135 | |
|------------------------|-----|------|---------------------------|--|
| | | | 1000 | |

|--|

| | | COMMISSION |
|---|---|--|
| June 1990) DEPARTMENT | ED STATES F OF THE INTERIOR AND MANAGEMENT | Bud Parker No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. |
| Do not use this form for proposals to drill of | D REPORTS ON WELLS or to deepen or reentry to a different reservoir. PERMIT - " for such proposals | NMNM12611 6. If Indian, Allottee or Tribe Name |
| SUBMIT | IN TRIPLICATE | 7. If Unit or CA, Agreement Designation |
| 1. Type of Well Oil Well Gas Well Other 2. Name of Operator | | 8. Well Name and No. Myers 'B' 3 |
| Meridian Oil Inc. 3. Address and Telephone No. | 9. API Well No. 30 - 025 - 09565 | |
| P.O. Box 51810, Midland, TX 7 4. Location of Well (Footage, Sec., T., R., M., or Survey Des Sec. 13, T24S, R36E | Jalmat | |
| 660' FNL & 1980' FWL | | 11. County or Parish, State Lea NM |
| 12. CHECK APPROPRIATE BOX(s) |) TO INDICATE NATURE OF NOTICE, REPORT | r, or other data |
| TYPE OF SUBMISSION | TYPE OF ACTION | <u> </u> |
| Notice of Intent Subsequent Report | Abandonment Recompletion Plugging Back | Change of Plans New Construction Non-Routine Fracturing |
| Final Abandonment Notice | Casing Repair Altering Casing Other Added Tansil pay | Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) |
| 6/2/95: MIRU. TOH w/rods and 6/4/95: TIH w/7" Baker CIBP, s CIBP, set @ 2992'. Dmp 15' cmt 6/6/95: Perf'd Tansil formation 6/7/95: A w/1500 gls 7.5% NEFE 6/8/95: F w/418 bbls 25# gel, | set @ 3456'. Dmp 15' cmt on top. To c on top. TOC @ 2977'. TIH w/2.875 on from 2864'-2947' (96 holes) | OC @ 3441'. TIH w/7" Baker " tbg to 2500'. 6/30 sand. |
| 6/11/95: ND WH. NU BOP. TIH w | 1/2 7/8" tbg and set @ 2912'. Turne | d to production. |
| Old Perfs: 3002' - 3226' New Perfs: 2864'-2947' | Lower | |
| | | |
| 14. I hereby certify that the foregoing is true and correct Signed | Title Regulatory Assistant | _{Date} <u>7/5/95</u> |
| (This space for Federal or State office use) Approved by Conditions of approval, if any: | Title | Date |