

Form 3160-5  
(July 1989)  
(Formerly 9-331)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING  
OFFICE FOR NUMBER  
OF COPIES REQUIRED  
(Other instructions on reverse  
side)

BLM Roswell District  
Modified Form No.  
NM060-3160-4

**SUNDRY NOTICES AND REPORTS ON WELLS**

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT-" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. <b>LC-054668</b>	
2. NAME OF OPERATOR <b>MERIDIAN OIL INC</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR <b>P.O. Box 51810, Midland, TX 79710-1810</b>		7. UNIT AGREEMENT NAME	
3a. AREA CODE & PHONE NO. <b>(915)688-6943</b>		8. FARM OR LEASE NAME <b>FARNSWORTH 4</b>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>E, 890' FWL &amp; 1650' FNL</b>		9. WELL NO. <b>12</b>	
		10. FIELD AND POOL, OR WILDCAT <b>RHODES YATES-7RIVERS</b>	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>SEC 4, T26S, R37E</b>	
14. PERMIT NO. <b>30-025-11938</b>	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>2987' GR</b>	12. COUNTY OR PARISH <b>LEA</b>	13. STATE <b>NM</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

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

17. 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.)\*

NOTIFY BLM PRIOR TO COMMENCING PLUGGING OPERATION.

RIH W/ CASING SCRAPER TO +/-2775'. SET CIBP @ +/-2750'. SPOT CMT PLUG FROM 2370-2750' (40 SXS). CIRC HOLE W/ 9 PPG GELLED BRINE.

SET A CMT PLUG FROM 1020-1140' (15 SXS). PERFORATE 4 SQUEEZE HOLES @ 390'. PUMP 125 SXS DN CSG. LEAVE PLUG IN 5 1/2" CASING TO SURFACE (DO NOT DISPLACE). CUT OFF CASING 3' BELOW GROUND LEVEL AND INSTALL P&A MARKER. CLEAR AND RESTORE LOCATION.

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

SIGNED Rexann Schaefer TITLE PRODUCTION ASST DATE 3/25/92

(This space for Federal or State office use)

APPROVED BY David H. Glass TITLE BLM District Manager DATE 4-3-92  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

**MERIDIAN OIL**  
 FARNSWORTH 4 NO. 12  
 RHODES FIELD  
 LEA COUNTY, NEW MEXICO

KLM 11/18/91

PROPOSED CONDITION AFTER P&A

