Form 3160-5 (June 1990)

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

Moles, and Figure Espate

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

5. Lease Designation and Serial No.

SUNDRY NOTICES	LC054668					
Do not use this form for proposals to dr Use "APPLICATION FOI	6. If Indian, Allottee or Tribe Name					
SUBMIT	7. If Unit or CA, Agreement Designation					
1. Type of Well						
Well Well Other	8. Well Name and No. FARNSWORTH					
2. Name of Operator MERIDIAN OIL INC.		4 # 9				
3. Address and Telephone No.		9. API Well No. 30-025-11944				
P.O. Box 51810 Midland, TX 7971	0 915-688-6800	10. Field and Pool, or Exploratory Area				
4. Location of Well (Footage, Sec., T., R., M., or Survey D NE/NW SEC. 4, T-26-S, R-37-E	LANGLIE MATTIX					
	•	11. County or Parish, State				
660 FNL & 2310 FWL	Unit C	LEA COUNTY, NM				
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPOR	RT, OR OTHER DATA				
TYPE OF SUBMISSION	TYPE OF ACTION					
X Notice of Intent	Abandonment	Change of Plans				
	Recompletion	New Construction				
Subsequent Report	Plugging Back	Non-Routine Fracturing				
	Casing Repair	Water Shut-Off				
Final Abandonment Notice	Altering Casing	Conversion to Injection				
	Other REQUEST TO TA WELL BY FOLLOWING PROCEDURES	Dispose Water (Note: Report results of multiple completion on Well				
12 Passiba Proposed on Completed Operations (Clearly, these		Completion or Recompletion Report and Log form.)				
give subsurface locations and measured and true verti-	Il pertinent details, and give pertinent dates, including estimated date of startin cal depths for all markers and zones pertinent to this work.)*	g any proposed work. If well is directionally drilled,				
	GENCY ONE DAY BEFORE COMMENCING WORK					
•	/8" 6.5# J-55 TO BE USED AS WORKSTRING TO L					
	PRODUCTION TBG. MIRU WIRELINE UNIT. RIH W/J					
	ESSURE UP CASING TO 500 PSI AND MONITOR FOR					
AND FINAL PRESSURES. IF CASING LEAKS, RIH W/WORKSTRING AND PACKER, LOCATE LEAK AND REPORT.						
4. RIH WITH PRODUCTION TBG. CIRCULATE INHIBITED PRODUCED WATER. POOH W/TBG LEAVING 10 JTS (KILL STRING)						
PRODUCTION TBG. ND BOP. NU WH. RDMO.						

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4.	RIH W	/ITH	PRODUCTION	TBG. CIRCULAT	E INHIBITED	PRODUCED WATER.	POOH W/TBG LEAVING	10 JTS (KILL STRING)
PR	ODUCTI	ION '	TBG. ND BOP.	NU WH. RDMO				

		C
14. I hereby certify that the foregoing is true and correct Signed DONNA WILLIAMS	Title PRODUCTION ASSISTANT	Date 8/2/93
(This space for Federal or State office use) Approved by Conditions of approval a say:	Title	Date AUG 25 1993