

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-25234 ✓

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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"
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

S.R. COOPER

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

MERIDIAN OIL INC.

8. Well No.

4

3. Address of Operator

P.O. BOX 51810 MIDLAND, TEXAS 79710-1810

9. Pool name or Wildcat

Jalmat-Tansill-Yates-7Rvs

4. Well Location

Unit Letter G : 2310 Feet From The North Line and 2310 Feet From The East Line

Section 23 Township 24-S Range 36-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3352.8 GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☒

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

2/11/93 - MIRU. ND WH. NU BOP. RIH. Tagged cmt retainer @ 3055. Circ. w/9 ppg gelled brine. Pmped 45 sxs cmt/2260-3055. LD tbg @ 1325. Pmped 25 sxs cmt/surface casing shoe/ 1135-1325. Pmped 10 sxs cmt from 50'. Circ. to surface. RDMO.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TITLE

Production Assistant

DATE 2/16/93

TYPE OR PRINT NAME

Donna Williams

TELEPHONE NO. 688-6943

(This space for State Use)

OIL & GAS INSPECTOR

JUL 07 1993

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: