

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NEW MEXICO COMMISSION
BUDGET NO. 1004-0135
EXPIRES: March 31, 1993
LC 030174-B

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	8. Well Name and No. Rhodes 'B' # 2 Federal
2. Name of Operator Meridian Oil Inc.	9. API Well No. 30-025-33124
3. Address and Telephone No. P.O. Box 51810, Midland, TX 79710-1810 915-688-6943	10. Field and Pool, or exploratory Area Rhodes Gas Pool
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2310' FSL & 1980' FWL Sec. 26, T26S, R37E	11. County or Parish, State LEA NM

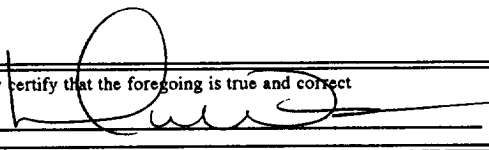
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Spud and Csg Program	<input type="checkbox"/> Dispose Water
	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

13. 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.)*

10/8/95: Spud. Drld a 12 1/4" hole to 554'. Ran 19 jts 8 5/8" 24# K-55 csg and set @ 554'. Used four (4) centralizers. Cmted w/lead - 280 sxs 'C' + 4% gel + 2% CaCl2 + .25 pps celloseal, tail w/150 sxs 'C' + 2% CaCl2 + .25 pps celloseal. Circ. cmt to surface. WOC 19 hrs.

Drld a 7 7/8" hole to 3150'. Ran 73 jts of 4 1/2" 11.6# K-55 csg and set @ 3150'. Used twelve (12) centralizers. Cmted w/lead - 536 sxs 'C' + 6% gel + 5% salt + .25 pps celloseal. Tail w/225 sxs 'C' + 3 pps KCL + .05% CF-14A. Circ. cmt to surface. WOC 13 days.

JAN 18 1996
SJS

14. I hereby certify that the foregoing is true and correct		
Signed 	Title Regulatory Assistant	Date 11/28/95
(This space for Federal or State office use)		
Approved by _____	Title _____	Date _____
Conditions of approval, if any:		

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.