PONS & VISSION

P. O. BOX 1980 HOBBS, NEW MEXICO 88240

Form 3160-5 (June 1990)

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or representations as to any matter within its jurisdiction.

UNITED STATES DEPARTMENT OF THE INTERIOR BUREA

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 TE | " If Unit or CA. Agreement Designation | |
|---|---|--|
| Type or Well Oll Gas Well Well Cother | | 8. Weil Name and No. |
| 2 Name of Operator | | Wells Federal # 11 |
| Meridian Oil Inc. | | 9. API Well No. |
| P.O. Box 51310 Midland, Tx 79710-1 | 10 Field and Pool. or Exploratory Area Jalmat-Tansil-Yates-7Rv | |
| Location of Well (Footage, Sec., T., R., M., or Survey Description) N, 430 FSL & 2317 FWL 4, T-25-S, R-37-E | 1 | 11. County or Parish. State |
| CHECK APPROPRIATE BOX(s) TO | INDICATE NATURE OF NOTICE | REPORT. OR OTHER DATA |
| TYPE OF SUBMISSION | TYPE OF | ACTION |
| Notice of Intent | | Change of Plans |
| Subsequent Report | Recompletion Plugging Back Control Dentity | Wew Construction |
| Final Abandonment Notice | Casing Repair Altering Casing Other | Conversion to Injection |
| | | (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) |
| 13 Describe Proposed or Completed Operations (Clearly state all pertinen give subsurface locations and measured and true vertical depths | for all markers and zones pertinent to this work.)* | |
| 2/3/93 - MIRU. ND WH. POH & LD rod Cap w/ 5 sx cmt. Set CIBP @ 2330. RIH w/tbg. Set 12 sx cmt plug @ 13 csg thru perfs. Circulate out brad | Cap w/ 20 sx cmt. Cir hole 80-1500. Perforate 5 1/2" (| w/9∄ brine laden gel. |
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| hereby certify that the foregoing is true and correct | Title | Production Assistant | Date _ | 2/9/93 |
| This space for Federal or State office use) | Title | Canadra and | Date _ | 2-17-93 |
| Conditions of approval, if any: | | | | |

| ÷. | Lease Designation and Serial No. |
|----|-----------------------------------|
| | IM - 14214 |
| 5 | It Indian. Allottee or Tribe Name |

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

| N. | M. | CIL | CONS. | ŗ | A127 |
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| AU | OF | LAND | MANAGEMENT | | |
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