

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

LC-054667

6. If Indian, Ailantee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Gregory A #6

9. API Well No.

30-025-11885 ✓

10. Field and Pool, or Exploratory Area

Langlie Mattix (7R, Q, G)

11. County or Parish, State

Lea

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

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Meridian Oil Inc.

3. Address and Telephone No.

P.O. Box 51810, Midland, TX

915-688-6800

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

P, 600' FSL 990' FEL, Sec. 33, T25S, R37E

CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent

☒ Subsequent Report

☐ Final Abandonment Notice

TYPE OF ACTION

☒ Abandonment

☐ Recompletion

☐ Plugging Back

☐ Casing Repair

☐ Altering Casing

☐ Other

☐ Change of Plans

☐ New Construction

☐ Non-Routine Fracturing

☐ Water Shut-Off

☐ Conversion to Injection

☐ Dispose Water

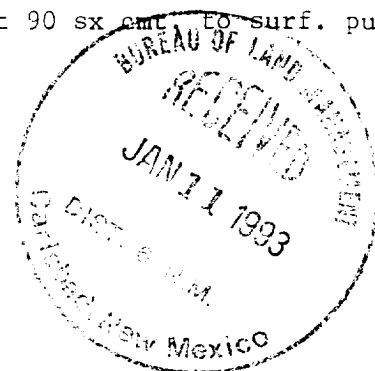
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

12/22/92 Notified BLM. RU set BPO. RIH w/workstring. Stung into cmt. retainer @2387'. sqzd. under retainer w/100 sx class "C" cmt. 2% Ca CL. Cap w/12 sx cmt. ROH. RIN w/ratainer. Set @965'. POH. RIH open ended to 1075'. SDFM.

12/23/92 Opened well up. Spot 25 sx cmt. @1075'. PUH to 500': spot 90 sx cmt. To surf. pull tbg. out of hole laying down. RDMO.

Approved _____
Licensee or operator must remain until
surface restoration is completed.



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

Signed _____

Title Production Assistant

Date 1-6-93

(This space for Federal or State office use)

Approved by _____

Title _____

Date 1-19-93

Conditions of approval, if any: