(June 1990)	TED STATES TT OF THE INTERIOR LAND MANAGEMENT AND REPORTS ON WELLS ill or to deepen or reentry to a different reservoir.	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. LC-054667 6. If Indian, Allottee or Tribe Name
Use "APPLICATION FOR PERMIT—" for such proposals SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
1. Type of Well		_
Oil X Gas Well Other		8. Weil Name and No. El Paso Tom Fed. #8
2. Name of Operator Meridian Oil Inc.		9. API Well No.
3. Address and Telephone No.		30-025-31799
P.O. Box 51810, Midland, TX 79710-1810 915-688-6800		10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		Jalmat Tansil Yates 7R
P, 33, T25S, R37E		11. County or Parish, State
660' FSL & 660' FEL		Lea
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
X Subsequent Report	Plugging Back	Non-Routine Fracturing
		Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	XX other set prod. csg.	Dispose Water

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13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of startung 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.)*

3-7-93 Drld. 7 7/8" hole to 3000'. Run 4½" 11.6# K-55 LTC csg. set @3000'. Cmtd. w/230 sxs C Lt. cmt. + 6% Bentonite +9.00 PPS NACL + 0.50 PPS FLocelle. tailed w/350 sxs C cmt + 1.00% CACL2 + 0.50% Halad - 9. Circ 50% returns. No cmt to surface. Cmtd 2nd stage w/430 sxs C Lt. cmt. + 9.00 PPS NACL + 0.25% Flocelle. WOC 3 days. Ran temp. survey, TOC @800'. Used 11 centralizers. Bümp plug to 1100 psi for 30 min..0K.

3-11-93 Run GR/CCL/CNL 2943' - 800'. PBTD @ 2942' and GR/CCL/CBL 2943' - 800'.

An

Completion or Recompletion Report and Log form.)

14. I hereby certify that the foregoing is true and correct Signed Manua Luse	915-688-6906 Title Production Assistant	Date4-2-93
(This space for Federal or State office use) Approved by Conditions of approval, if any:	Title	Date
Title 18 U.S.C. Section 1001, makes it a crime for any person kno or representations as to any matter within its jurisdiction.	wingly and willfully to make to any department or agency of the Uni	ted States any false, fictitious or fraudulent statements

*See Instruction on Reverse Side