

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. 30-025-09710

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-1167

7. Lease Name or Unit Agreement Name
Langlie "A" State

8. Well No. 1

9. Pool name or Wildcat
Langlie Mattix 7R, ON, GB

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.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Meridian Oil Inc.

3. Address of Operator
P.O. Box 51810, Midland, TX 79710-1810

4. Well Location
Unit Letter I : 1980 Feet From The S Line and 660 Feet From The E Line

Section 36 Township 24S Range 36E NMPM Lea County

10. Elevation (SHOW WHETHER DF, RKB, RT, GR, etc.)
3255' DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☒
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		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.

12/18/92 MIRU. NUBOP. RIH w/bit. TOH TIH w/CIB, P 3320'. set @3320'. SDFN

12/19/92 Circ. hole w/9# mud. spot 5 sxs cmt 3320'. pull tbq. 2720'. Spot 25 sxs cmt 2720'. Pull tbq. to 1290'. spot 25 sxs cmt. 1290'. finish TOH. LD workstring. perf 410' pmp 100 sxs cmt. circ. to surface. RDMO

12/21/92 Cut off plate marker.

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

SIGNATURE Donna Williams TITLE Production Assistant DATE 1-6-93

TYPE OR PRINT NAME Donna Williams 915-688-6943 TELEPHONE NO.

(This space for State Use)

APPROVED BY Charles L. Serran TITLE OIL & GAS INSPECTOR DATE MAR 10 1993

CONDITIONS OF APPROVAL, IF ANY: