



STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

SUBMIT ORIGINAL AND 1 COPY



FOR OFFICE USE ONLY			
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SUNDRY NOTICES AND REPORT 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-" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER			5. FEDERAL/INDIAN STATE LEASE NO. 26922
2. NAME OF OPERATOR MERIDIAN OIL INC.			6. PERMIT NO. 941950
3. ADDRESS OF OPERATOR P.O. Box 51810 CITY STATE ZIP CODE Midland TX 79710-1810			7. API NO. 05-071-6216
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 786' FNL & 366' FEL At proposed prod. zone SAME			8. WELL NAME APACHE CANYON
			9. WELL NUMBER 2-1
			10. FIELD OR WILDCAT APACHE CANYON (2818)
12. COUNTY LAS ANIMAS			11. QTR. QTR. SEC., T.R. AND MERIDIAN NE/NE, 2, 34S, 68W

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

13A. NOTICE OF INTENTION TO:

- ☐ PLUG AND ABANDON
- ☐ MULTIPLE COMPLETION
- ☐ COMMINGLE ZONES
- ☐ FRACTURE TREAT
- ☐ REPAIR WELL
- ☒ OTHER EXTEND PERMITS

13B. SUBSEQUENT REPORT OF:

- ☐ FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)
 - ☐ ABANDONED LOCATION (WELL NEVER DRILLED- SITE MUST BE RESTORED WITHIN 6 MONTHS)
 - ☐ REPAIRED WELL
 - ☐ OTHER
- *Use Form 5 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingle Completions and Recompletions

13C. NOTIFICATION OF:

- ☐ SHUT-IN/TEMPORARILY ABANDONED (DATE _____) (REQUIRED EVERY 6 MONTHS)
- ☐ PRODUCTION RESUMED (DATE _____)
- ☐ LOCATION CHANGE (SUBMIT NEW PLAT)
- ☐ WELL NAME CHANGE
- ☐ OTHER _____

14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (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.

15. DATE OF WORK _____

MERIDIAN OIL INC. RESPECTFULLY REQUESTS APPROVAL TO EXTEND SAID PERMIT FOR ANOTHER SIX (6) MONTHS. REFERENCED PERMIT EXPIRES ON JUNE 25, 1995.

BEST IMAGE
AVAILABLE

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

SIGNED Donna Williams

TELEPHONE NO. **915-688-6943**

NAME (PRINT) **DONNA WILLIAMS**

TITLE **REGULATORY ASSISTANT**

DATE **5/10/95**

(This space for Federal or State office use)

APPROVED Jackie Hoke

TITLE **EA**

DATE **6-26-95**

CONDITIONS OF APPROVAL, IF ANY:

Extended to → Dec. 22, 1995