Form 3160-5 (November 1983)

UNITED STATES

SUBMIT IN TRIPLICATE*
(Other instructions on re-

Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985

Formerly 9-331) DEPARTMENT OF THE INTERIOR verse alde) BUREAU OF LAND MANAGEMENT					NM 15646	
	SUNDR	Y NOTICES A	AND REPORT	S ON WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
١.	(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.) OIL WELL WELL OTHER NAME OF OPERATOR Merrion Oil & Gas Corporation				7. UNIT AGREEMENT NAME	
7					8. FARM OR LEASE NAME	
					Federal 21	
	ADDRESS OF OPERATOR	9. WBLL NO.				
	P. O. Box 840,	Farmington,	New Mexico	87499	2 10. FIELD AND POOL, OR WILDCAT	
5	See also space 17 below.)	rt location clearly an	d in accordance with	RECEIVED		
4	At surface 2310' FNI	L and 2310' F	WI.	ILOLIVED	Ojo Encino - Entrada 11. sec., t., e., m., or elk. and survey or area	
	2310 1111	, una 2510 1	2	MAY 221986	SURVEY OR ALEX	
			EVATIONS (Show wheth		Sec. 21, T 20N, R5W	
14. 1	PERMIT NO.	15. EL	6818' KB	BUREAU OF LAND MANAGEM	ENT	
		Cl 1 A		FARMINGTON RESOURCE AF		
16.	Cilear Appropriate Dox to the control of the contro				EQUENT REPORT OF:	
	NOTICE OF INTENTION TO:				REPAIRING WELL	
	TEST WATER SHUT-OFF		COMPLETE	WATER SHUT-OFF FRACTURE TREATMENT	ALTERING CASING	
	SHOOT OR ACIDIZE	ABANDON'		SHOOTING OR ACIDIZING	ABANDON MENT*	
	REPAIR WELL	CHANGE 1		(Other) Change	of operator	
	(Other)			(Note: Report res Completion or Reco	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) t details, and give pertinent dates, including estimated date of starting any tions and measured and true vertical depths for all markers and zones perti-	
	Please change	operator from	n: Texaco Ir P. O. Box Denver, C	< 2100		
		to:	P. O. Box	Oil & Gas Corporation x 840 on, New Mexico 87499		
	80 ma	ত । এই হাঁটি কৈ ক প্রত্যুক্ত ইউটেই ক উক্কুক্ত হৈছে উক্কুজ ইউটিই ইউটিই	ta tagili. Natara		MAY 2 9 1986 IL CON. DIV. DIST. 3	
	I hereby certify that the	e foregoing is Arue as		Operations Manager	DATE 5/21/86	
	SIGNED Fodoral	ov State office nect			ACCEPTED FOR RECORD	
	(This space for Federal	or state outer use)	mrm* v		PATE	
	APPROVED BYCONDITIONS OF APPR	ROVAL, IF ANY:	TITLE		MAY 2 3 1977	
					MATZUV	

*See Instructions on Reverse Side

FARMINGTON RESUURCE AREA