

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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

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—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 4953
2. NAME OF OPERATOR Merion Oil & Gas Corporation	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 840, Farmington, New Mexico 87499	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1,980' FNL and 990' FWL	8. FARM OR LEASE NAME Federal 15
14. PERMIT NO.	9. WELL NO. 2 H
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6,617' KB 6604 GL	10. FIELD AND POOL, OR WILDCAT Papers Wash Entrada
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 15, T19N, R5W
	12. COUNTY OR PARISH McKinley
	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		OTHER COMMENTS:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT <input type="checkbox"/>	REPAIR WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) remedial cement <input checked="" type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Record of Completion Report and Log form.)	

17. 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.)

Merrion requests permission to conduct remedial cementation on the 4-1/2" liner.

During primary cementation procedures an open hole inflatable packer was not inflated and due to failure of a drain sleeve, cement equalized inside and out of 4-1/2" liner. After liner cleanout our swab tests of Entrada show high water cut. We suspect the Morrison could be the culprit and proposed to cement as follows:

1. Perf 2 squeeze holes @ 5,060' K3 ± and 2 squeeze holes @ 4,830' KB ±.
2. Set drillable bridge plug @ 5,130 ±.
3. Set cement retainer @ 5,050' KB ±.
4. Establish circulation under retainer through squeeze holes to upper squeeze holes.
5. Cement with ≈ 30 sx class "G" cement.
6. Drill out and run bond log to evaluate. (Schematic attached)

(Verbal okay received from Steve Mason February 27, 1990)

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

SIGNED Steven S. Dunn TITLE Operations Manager

DATE MAR 13 1990

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

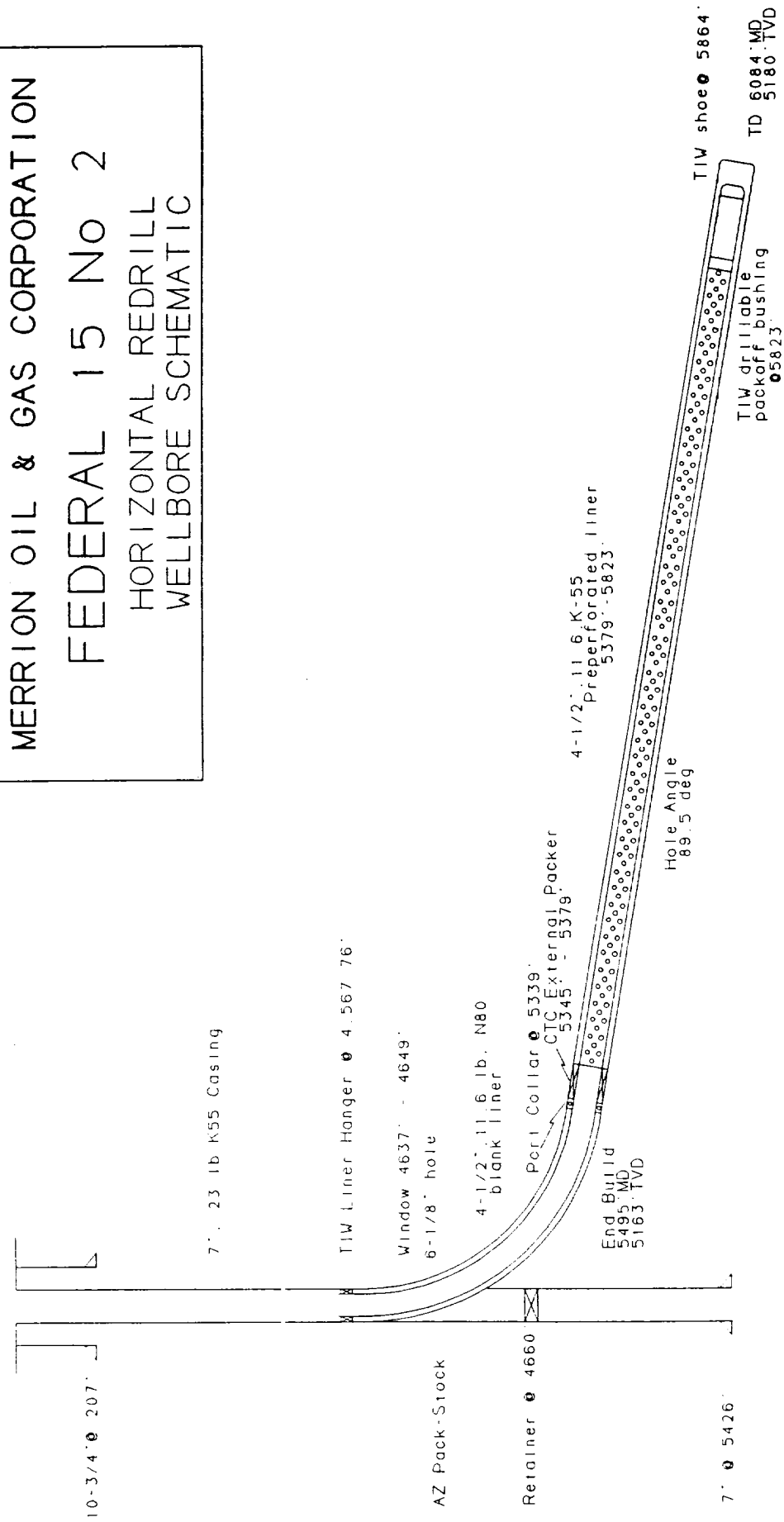
BLM - 5
Pitco - 1
Aviva, Inc. - 1
Well file - 1

*See Instructions on Reverse Side

Approved _____

DATE MAR 13 1990
Chief, Branch of
Mineral Resources
Farmington Resource Area

Elevations 6614 KB
5604 GL



ADB 02/90