Distribution: O+4 (BLM); 1-Accounting; 1-	Crystai; 1-riie		_	
(June 1990) DEPARTMENT OF				FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 Designation and Serial No.
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT" for such proposals		NM-24964 6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE			7. If Unit	or CA, Agreement Designation
1. Type of Well			7	
Oil Gas X Well Well Other			8. Well Name and No.	
2. Name of Operator			Pot Mesa #1	
Merrion Oil & Gas Corporation			9. API Well No.	
3. Address and Telephone No. 610 Reilly Avenue, Farmington, NM 87401-2634 (505) 327-9801			30-031-20882 10. Field and Pool, or Exploratory Area	
610 Reilly Avenue, Farmington, NM 87401-2634 (505) 327-9801 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			Pot Mesa Mesaverde	
600' fnl & 1980' fel (nw ne)			11. County or Parish, State	
Section 10, T20N, R6W			McKinley County, New Mexico	
12. CHECK APPROPRIATE BOX	(s) TO INDICA	TE NATURE OF NOTICE, REPO	RT, OR	OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	ı		
X Notice of Intent		Abandonment	X	Change of Plans
		Recompletion		New Construction
Subsequent Report		Plugging Back		Non-Routine Fracturing Water Shut-Off
Fire! Abandonment Notice		Casing Repair Altering Casing		Conversion to Injection
Final Abandonment Notice		Other		Dispose Water
	<u> </u>	Outer	(Note: F	leport results of multiple completion on
13. Describe Proposed or completed Operations (Clearly state all pe	ertinent details, and give	pertinent dates, including estimated date of startin		tion or Recompletion Report and Log form.) I work. If well is directionally drilled,
give subsurface locations and measured and true vertical de				
Merrion Oil & Gas had planned to return replaced and the surface equipment is a would not start. The pump was more of is approximately 4 weeks. We therefore to July 1, 1997.	ready to start, h ostly to repair th	owever, the injection pump on the name on the purchase of a new pump	ne Pot Me . Deliver	y for the new pump ction be extended
		DECENVI N MAY 2 1 1997		TO FREE WORLD IN THE
		@[]L G@M. D dist. 3		<u> </u>
14. I hereby certify that the foregoing is true and correct				
Signed Connie S. Dinni	ng Title	Contract Engineer	Date	5/14/97
(This space for Federal or State office use) Approved By Continue of control if any in the space of the spa	Title		Date	MAY 9 1997
Conditions of approval, if any:				