Form 3160-5
November 1983
Formerly 9-331

UNITED STATES
DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.
NM 53926

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

7. UNIT AGREEMENT NAME

WELL X WELL OTHER

2. NAME OF OPERATOR
Merrion Oil & Gas Corporation

8. FARM OR LEASE NAME
Corrales

3. ADDRESS OF OPERATOR
P. O. Box 840, Farmington, New Mexico 87499

9. WELL NO.
1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
465' FSL and 1785' FEL

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DEC 09 1985
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

10. FIELD AND POOL, OR WILDCAT
WC Mesaverde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 3, T20N, R6W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6912' GL

12. COUNTY OR PARISH
McKinley

13. STATE
New Mexico

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) TD, Production Casing			
(Other)				(NOTE: Report results of multiple completion on Well Completion or Recompletion 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.)*

TD 12/3/85 3223' KB.

Ran 5.5, 14 #/ft, J-55 production casing. Set casing at 3197' KB with 190 sx Class B 2% chemical extender (391.4 cu. ft.). 190 sx Class H 2% gel (231.8 cu. ft.). Circulated 4 Bbls to surface.

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DEC 12 1985
OIL CON. DIV.
DIST. 3

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

SIGNED [signature] TITLE Operations Manager DATE 12/5/85

ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOCC