| -Form 3160-5 | UNITED STATES | SUBMIT IN TRIPLICATE• | Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985 |
|---|---|--|---|
| (November 1983) (Formerly 9-331) DEPART | MENT OF THE INTER | IOR (Other instructions on re- | 5. LEASE DESIGNATION AND SERIAL NO. |
| BUREAU OF LAND MANAGEMENT | | | NM 53926 |
| SUNDRY NO | TICES AND REPORTS onals to drill or to deepen or plug cation FOR PERMIT—" for such p | ON WELLS | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 1. | | | 7. UNIT AGREEMENT NAME |
| OIL X GAS OTHER | location | | |
| 2. NAME OF OPERATOR | 100001011 | | 8. FARM OR LEASE NAME |
| Merrion Oil & Gas Corp | poration | / | Corrales |
| 3. ADDRESS OF OPERATOR | | | 9. WBLL NO. |
| P. O. Box 840, Farming | aton. New Mexico 8749 | 99 | 3 |
| 4 LOCATION OF WELL (Report location | clearly and in accordance with any | State requirements.* | 10. FIELD AND POOL, OR WILDCAT |
| See also space 17 below.) At surface RECEIVED | | | WC Mesaverde |
| 465' FSL and 980' FWL | | , | 11. SEC., T., B., M., OR BLK. AND |
| 103 155 414 300 1115 | | MAY 21 1986 | SURVEY OR AREA |
| | | MAI 21 1300 | Sec. 3, T20N, R6W |
| 14, PERMIT NO. | 15. ELEVATIONS (Show whether D | F, RT, GR, etc.) | 12 COUNTY OF PARISH 13 STATE |
| | 6875' GL | BUREAU OF LAND MANAGEMEN FARMINGTON RESOURCE AREA | McKinley New Mexico |
| | | | |
| 16. Check A | Appropriate Box. To Indicate 1 | Nature of Notice, Report, or C | Other Data |
| NOTICE OF INTE | ENTION TO: | SUBSEQ | UBNT 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) _Correction | -\ |
| (Other) | CHANGE | (Norr: Report results | of multiple completion on Well |
| | presentions (Clearly state all pertine) | | letion Report and Log form.) , including estimated date of starting any |
| proposed work. If well is direct nent to this work.)* This well has never be | | | al depths for all markers and zones perti- |
| A replacement well sig | gn has been ordered. | | |
| | | | |
| | | | |
| | | | |
| | | e e | PEINED |
| | | IU) E | GEIVEN |
| | | \sim | |
| | | | |
| | | M | AY 2 71986 |

*See Instructions on Reverse Side

TITLE

Operations Manager

true and correct

18. I hereby certify

(This space for Federal or State office use)

FARMINGTON RESOURCE AREA FARMINGTON, NEW MEXICO

MAY 2 3 1986

AGGEPTED FOR RECORD

DIST. 3

Title 18 U.S.C. Section 1001, makes it a crime for any person knowings and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.