HNITED STATES

| | pudget | Dureau | 140. | 42-R |
|-------|--------|--------|------|------|
| LEASE | | | | / |

| UNITED STATES | 5. LEASE NM 23231 | | |
|--|---|--|--|
| DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | | |
| SUNDRY NOTICES AND REPORTS ON WELLS | 7. UNIT AGREEMENT NAME | | |
| (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.) | 8. FARM OR LEASE NAME | | |
| 1. oil gas cother | Theodore Zink | | |
| well Well other 2. NAME OF OPERATOR | 9. WELL NO. | | |
| Merrion Oil & Gas Corporation | 10. FIELD OR WILDCAT NAME | | |
| 3. ADDRESS OF OPERATOR | Undesignated | | |
| P. O. Box 1017, Farmington, New Mexico 87401 | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA | | |
| 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) | Sec. 15, T23N, R6W | | |
| AT SURFACE: 460' FNL & 1005' FWL | 12. COUNTY OR PARISH 13. STATE | | |
| AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: Same | Rio Arriba New Mexico | | |
| Datte | 14. API NO. | | |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | 15. ELEVATIONS (SHOW DF, KDB, AND WD) | | |
| , | 6821 GL | | |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: | And iff | | |
| TEST WATER SHUT-OFF | | | |
| SHOOT OR ACIDIZE | | | |
| REPAIR WELL | (NOTE: Report results of multiple completion or zone change on Form 9–330.) | | |
| PULL OR ALTER CASING | Change on Form 9-330.) | | |
| CHANGE ZONES | | | |
| ABANDON* (other) Spud | | | |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertine Spudded 4/13/82. | directionally drilled, give subsurface locations and | | |
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| | | | |
| Subsurface Safety Valve: Manu. and Type | Set @ Ft. | | |
| 18. I hereby certify that the foregoing is true and correct | | | |
| SIGNED TITLE Operations M | lanagerate 4/14/82 | | |
| (This space for Federal or State o | ffice use) | | |
| APPROVED BY TITLE | PATERFETER FOR RECORD | | |
| CONDITIONS OF APPROVAL, IF ANY: | Established Some | | |
| | _{1.} 201982 | | |
| | Fr. Factor 188 | | |

*See Instructions on Reverse Side

PARMITET D. CALBET