

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-1207-1
7. Unit Agreement Name
8. Farm or Lease Name Enchilada
9. Well No. 1
10. Field and Pool, or Wildcat Counselors Gallup
12. County Rio Arriba

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Merrion Oil & Gas Corporation

3. Address of Operator
P. O. Box 1017, Farmington, New Mexico 87499

4. Location of Well
UNIT LETTER B 860 FEET FROM THE North LINE AND 1825 FEET FROM
THE East LINE, SECTION 16 TOWNSHIP 23N RANGE 6W NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
5760' GL

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) *SEE RULE 1103.

Spud 2/14/84. 9 5/8"
Set 210' of surface casing @ 230' KB with 175 sx cement.
Circulated 3 Bbls to surface.
Pressure tested to 600 PSI - held OK.

RECEIVED
FEB 22 1984
OIL CON. DIV.
DIST. 3

8. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Signed Frank T. Chavez TITLE Operations Manager DATE 2/20/84

Original Signed by FRANK T. CHAVEZ
APPROVED BY _____ TITLE SUPERVISOR DISTRICT # 3 DATE FEB 22 1984

CONDITIONS OF APPROVAL, IF ANY: