

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**SUNDRY NOTICES AND REPORTS ON WELLS**

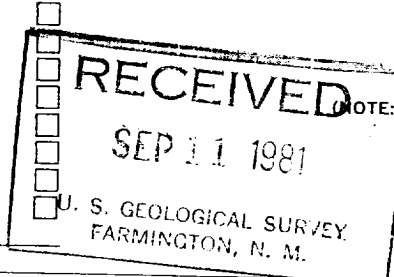
(Do not use this form for proposals to drill or to deepen or plug a well to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☐ other ☒ Dry Hole
2. NAME OF OPERATOR  
J. Gregory Merrion & Robert L. Bayless
3. ADDRESS OF OPERATOR  
P.O. Box 507 Farmington, NM 874990507
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1850' FSL & 1180' FWL  
AT TOP PROD. INTERVAL: same  
AT TOTAL DEPTH: same
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☒  
(other) ☐

SUBSEQUENT REPORT OF:



5. LEASE  
Contract 45
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Jicarilla
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Ponca
9. WELL NO.  
4
10. FIELD OR WILDCAT NAME  
Ballard Pic. Cliffs
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 19, T23N, R4W
12. COUNTY OR PARISH  
Sandoval
13. STATE  
NM
14. API NO.  
30-043-20540
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6952' G.L.

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.)\*

- \* Proposed to plug and abandon for lack or commercial quantities of natural gas by setting plugs as follows:  
Across Pictured Cliffs, Fruitland - 2500' - 2200' KB  
50 ft. above and below Ojo Alamo - 1900' - 2100' KB  
Surface Plug - 100' to surface  
Plugs spotted with drill pipe.  
Will erect dry hole marker and reclaim surface per your instructions.
- \* (Plugging done 9/5/81 per verbal instruction received 6:00 A.M. on 9/5/81 from Mr. Ray Swanson of U.S.G.S. office.)

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED [Signature] TITLE Engineer DATE 09/09/81

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMOCC

