

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

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

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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR  
Merrion Oil & Gas Corporation

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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface  
660' FSL and 660' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
6874' GL

RECEIVED

AUG 29 1985

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

5. LEASE DESIGNATION AND SERIAL NO.  
Cont. 430

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Jicarilla

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Jicarilla 430

9. WELL NO.  
10

10. FIELD AND POOL, OR WILDCAT  
Undes. Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 25, T23N, R5W

12. COUNTY OR PARISH  
Sandoval

13. STATE  
New Mexico

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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐  
FRACTURE TREATMENT ☐ ALTERING CASING ☐  
SHOOTING OR ACIDIZING ☐ ABANDONMENT\* ☐  
(Other) Surface Casing, Spud

(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.)\*

Spud 8/24/85.

Ran 8-5/8", 24 #/ft. J-55 surface casing. Set casing at 218' KB with 170 sx (200.6 cu. ft.) Class B, 3% CaCl2.

Circulated 4 Bbls to surface.

Pressure tested casing to 600 PSI for 30 minutes. Held.

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

SIGNED [Signature] TITLE Operations Manager

ACDATE 8/27/85

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

DATE AUG 29 1985

\*See Instructions on Reverse Side