UNITED STATES DEPARTMENT OF THE INTERIOR

Form 9–331		orm Approved. udget Bureau No. 42–R1424
UNITED STATES	5. LEASE	
DEPARTMENT OF THE INTERIOR	NM 25816	
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOT	TEE OR TRIBE NAME.
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different	7. UNIT AGREEMENT	NAME
reservoir, Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME Silky Sullivan	
1. oil gas well other	9. WELL NO. 1	
2. NAME OF OPERATOR Merrion Oil & Gas Corporation 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME WC Chacra	
P. O. Box 840, Farmington, New Mexico	11. SEC., T., R., M., O	R BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA Sec. 15, T21N, R7W	
AT SURFACE: 1670' FNL and 2290' FWL AT TOP PROD. INTERVAL: Same	12. COUNTY OR PARI Sandoval	SH 13. STATE New Mexico
AT TOTAL DEPTH: Same 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.	
REPORT, OR OTHER DATA	15. ELEVATIONS (SH	OW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) Spud, Surface Casing, TD, Casing AUG 07 TO. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is of measured and true vertical depths for all markers and zones pertinent Spud 7/29/85, 9:00 PM. Ran 8-5/8", 24 #/ft, J-55 surface casing. See (94.4 cu. ft.) Class B, 2% CaCl2. Pressure tested casing to 600 PSI for 30 minut TD 3287' KB 8/4/85. Spotted plug at 1950' KB. 20 sx Class H (23. Ran 4-1/2", 10.5 #/ft., J-55 production casing 380 sx Class H (463.6 cu. ft.) 2% gel. Circulated 30 Bbls cement to surface.	e all pertinent details, a lirectionally drilled, give nt to this work.)* et casing @ 131' ttes. Held. 6 cu. ft.) 2% Ca	subsurface locations and KB with 80 sx Cl2.
Subsurface Safety Valve: Manu. and Type 18. I hereby centify that the foregoing is true and correct SIGNED TITLE Operations Ma (This space for Federal or State of APPROVED BY	nager date8/5/	85
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE	
		- 1985

*See Instructions on Reverse Side