

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 back to a different reservoir. Use Form 9-331-C 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 (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 990' FSL and 1840' FEL  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

15. 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) repair casing

SUBSEQUENT REPORT OF:

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RECEIVED

JUL 11 1984

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

BUREAU OF LAND MANAGEMENT  
FARMINGTON, NEW MEXICO

5. LEASE

SF 078874

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Canyon Largo Unit

8. FARM OR LEASE NAME

Canyon Largo Unit

9. WELL NO.

299

10. FIELD OR WILDCAT NAME

Devils Fork Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 4, T24N, R6W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6435' GL

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.)\*

Move in, rig up pulling unit. Establish injection rate.  
Trip in hole open ended to 1540' KB.  
Mix and spot 50 sx Class H 2% CaCl<sub>2</sub> with .6% fluid loss additive.  
Trip out of hole.  
Squeeze bad casing section.  
Drill out cement and pressure test to 1000 PSI.  
If holds pressure, run retrieving head and swab test squeeze section.  
If no fluid entry, retrieve bridge plug.  
Clean out to 5637' KB, PBTD with sand line bailer if necessary.  
Rerun production tubing and flange up wellhead. Swab in.

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

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

SIGNED [Signature] TITLE Operations Manager DATE 7/10/84

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED

[Signature] Stan McKee

NMOCC

ILL. MILLERDACH  
for AREA MANAGER