

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
J. Gregory Merrion & Robert L. Bayless

3. ADDRESS OF OPERATOR
P.O. Box 507 Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1710' FSL & 1650' FWL
AT TOP PROD. INTERVAL: same
AT TOTAL DEPTH: same

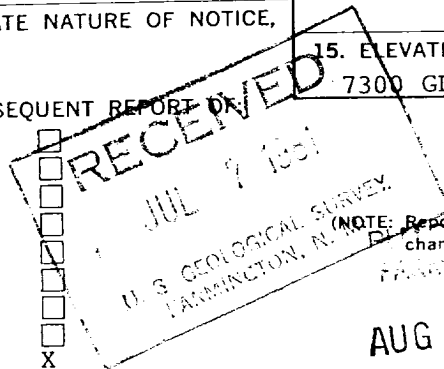
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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) Ran tubing

SUBSEQUENT REPORT ON

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5. LEASE
NM-03992

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
East Lindrith

9. WELL NO.
6

10. FIELD OR WILDCAT NAME
South Blanco Pic. Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 26, T24N, R2W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
7300 GL, 7305 KB

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

AUG 4 1981

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.)*

06-25-81 SIP - 695PS16. Blow well down and put on test 3/4" plate.

06-26-81 After 20 hours well making 30 PSIG on 3/4" plate. Rate 490 MCF/day, light mist water. Rig up Bayless Rig 3. Run sinker bar and depthometer. Fill @3230' KB. Run 2 1/16" I.J. siphon string to 3119' KB. Shut-in well. Move rig off.

Subsurface Safety Valve: Manu. and Type

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

SIGNED [Signature] TITLE Co-Owner DATE 07-06-81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

