Form 9-331 Dec. 1973

UNITED STATES DEPARTMENT OF THE INTERIOR

| Form A | orm Approved. | | |
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| Budget | Bureau No. | 42-R1424 | |

| 5. | LEASE | |
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| ਵਿਸ਼ | 079086 | |

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|---|-------|------|-----|-------|-------|-------|-----|

| GEOLOGICAL SURVEY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | | |
|--|--|--|--|
| SUNDRY NOTICES AND REPORTS ON WELLS | 7. UNIT AGREEMENT NAME | | |
| (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 에에네 briposels=) | 8. FARM OR LEASE NAME | | |
| 1. oil R gas | Canada Mesa Com | | |
| 1. oil gas other | 9. WELL NO. | | |
| 2. NAME OF OPERATOR | 4 | | |
| Merrion Oil & Gas Corporation | 10. FIELD OR WILDCAT NAME | | |
| 3. ADDRESS OF OPERATOR | Devils Fork Gallup - Casur Al | | |
| P. O. Box 1017, Farmington, New Mexico 8749 | 11. SEC., T., R., M., OR BLK. AND SURVEY OR | | |
| 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 | AREA | | |
| below.) | Sec. 10, T24N, R6W | | |
| AT SURFACE: 790' FNL & 790' FEL | 12. COUNTY OR PARISH 13. STATE Rio Arriba New Mexico | | |
| AT TOP PROD. INTERVAL: Same Same | | | |
| Same | 14. API NO. | | |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, | | | |
| REPORT, OR OTHER DATA | 15. ELEVATIONS (SHOW DF, KDB, AND WD) 6409' GL | | |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: | | | |
| TEST WATER SHUT-OFF | | | |
| | WE AND THE RIVER | | |
| SHOOT OR ACIDIZE | | | |
| REPAIR WELL | (NOTE: Report results of multiple completion or pare | | |
| PULL OR ALTER CASING | (NOTE: Report results of multiple completion or change on Form 9–330.) | | |
| MULTIPLE COMPLETE GUANGE ZONES | CO : 5 T 1903 | | |
| CHANGE ZONES | TABLE BUILDON. DIV. | | |
| (other) Packer Test | | | |
| | DIST. 3 | | |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is different and true vertical depths for all markers and zones pertinent | irectionally drilled, give subsurface locations and | | |
| Model D Packer set @ 6375' KB. Pressure tes | ted to 4000 PSI. Held good. | | |
| Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true and correct SIGNED TITLE Operations M (This space for Federal or State of | lanageрате <u>10/5/83</u> | | |
| · | | | |
| APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY: | DATE | | |
| CONDITIONS OF AFFROYAC, IF ANT. | ACCEPTED FOR RECORD | | |
| | MODELLED LOW MEDOUD | | |

*See Instructions on Reverse Side

OCT 2 0 1983

FARMINGTUM RESUURCE AREA