

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

EXPIRES AUGUST 31, 1985
LEASE DESIGNATION AND SERIAL NO.
SF 079915
IF INDIAN, ALLOTTEE OR TRUST 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 reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. NAME OF OPERATOR
Merrion Oil & Gas Corporation

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

3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
960' FSL and 350' FEL

4. PERMIT NO.

5. ELEVATIONS (Show whether on BLM or other land)
6613' GL

6. UNIT AGREEMENT NAME
Canyon Largo Unit

7. FARM OR LEASE NAME
Canyon Largo Unit

8. WELL NO.
363

9. FIELD AND POOL, OR WILDCAT
Devils Fork Mesaverde

10. SEC., T., S., R., OR BLM. AND SURVEY OR AREA
Sec. 1, T24N, R7W

11. COUNTY OR PARISH
Rio Arriba

12. STATE
New Mexico

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MAY 23 1985

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

NOTICE OF INTENTION TO:

TEST WATER SHUT OFF	FULL OR ALTER CASING	WATER SHUT OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE LEASE	(Other) ... Spud, Surface casing	

(Other) ... Spud, Surface casing
(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 zone pertinent to this work.)*

Spud 5/21/85, 12:15 PM.

Ran 8-5/8", 23 #/ft. J-55 surface casing. Set casing at 223' KB with 170 sx (200.6 cu. ft.) Class B 3% CaCl₂.
Circulated 3 Bbls to surface.
Pressure tested casing to 600 PSI for 30 minutes. Held good.

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MAY 29 1985
OIL CON. DIV.
DIST. 3

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

SIGNED: [Signature] TITLE: Operations Manager

DATE: 5/22/85

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY: [Signature] TITLE: [Signature]
COMMISSIONER OF APPROVAL, IF ANY:

DATE: MAY 28 1985

*See Instructions on Reverse Side

FARMINGTON REBOUND AREA
RV: [Signature]