UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

/SF	079071 A	•	•

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 such proposals.)

other

8. FARM OR LEASE NAME

gas well well X

SUBSEQUENT REPORT OF:

П

Coral Unit 28

2. NAME OF OPERATOR

Merrion Oil & Gas Corporation

9. WELL NO.

E /I EASE

3. ADDRESS OF OPERATOR

10. FIELD OR WILDCAT NAME

P. O. Box 1017, Farmington, New Mexico 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 Basin Dakota

1105' FML and 790' FWL AT SURFACE:

AREA Sec. 28, T25N, R6W

AT TOP PROD. INTERVAL:

Rio Arriba

12. COUNTY OR PARISH 13. STATE New Mexico

AT TOTAL DEPTH:

Same

14. API NO.

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

15. ELEVATIONS (SHOW DF, KDB, AND WD) 6760' GL

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

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) Change well name

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

SEP 16 1982

U. S. GEOLOGICAL SURVEY FARMINGTON, N. M.

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.)*

> Merrion Oil & Gas Corporation has obtained this well from Kimbell Oil Co. through a farmout to plug back the Dakota Formation and produce the Gallup Formation. Please change the name of this well from the Coral Waster-1 to the Canyon Largo Unit 319.

SEP 22 1982 OIL COM. COM. DIST. 3

The same of the sa				•	
Subsurface :	Safety Valve:	Manu. and	Туре		

Set @ __

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

TITLE Operationa Manager DATE

(This space for Federal or State office use)

CONDITIONS OF APPROVAL IF ACCEPTED FOR RECORD APPROVED BY

DATE

SFP 2 0 1382

*See Instructions on Reverse Side

FARMINGTON DISTRICT