

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 16464

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Crow Mesa

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Ballard Picture Cliff

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

34

Sec. 24, T25N, R8W

12. COUNTY OR PARISH 13. STATE

San Juan

N.M.

1.

OIL ☐ GAS ☒
WELL WELL OTHER

2. NAME OF OPERATOR

J. Gregory Merrion and Robert L. Bayless

3. ADDRESS OF OPERATOR

P.O. Box 507, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

790 FSL and 1830 FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7237 ft. GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(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 zones pertinent to this work.)*

09-14-77 Rig up Big "A" Well Service, Go Wireline, and Western Company. Ran Gamma-Ray Correlation log. Perforated 2554'-60' with 1 PF and 2575'-80' with 1 PF. Swabbed well down. Acidized with 500 gallons 7-1/2% HCL. ISDP 500 PSIG. Swabbed load back. Slight blow of gas with no water entry indicated. Preparing to frac.



RECEIVED
SEP 15 1977

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

SIGNED

Steven L. Lunn

TITLE

Engineer

DATE Sept. 14, 1977

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: