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

Dec. 1973	Budget Buree No. 42-R1424
UNITED STATES DEPARTMENT OF THE INTERIOR	5. LEASE NM 12760
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE 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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME 1
1. oil gas	8. FARM OR LEASE NAME 4 275 Liberty Bells 5 285
well well other Dry Hole 2. NAME OF OPERATOR	9. WELL NO. STEP OF THE PROPERTY OF THE PROPER
J. Gregory Merrion & Robert L. Bayless 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME Wildcat
P.O. Box 507, Farmington, NM 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA ម៉ូក ខ្លួច មួយ ម៉ូក សម្ព Section 5, T26N, R12W ៖ A
AT SURFACE: 790 FNL & 1850 FWL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	12. COUNTY OR PARISH 13. STATE
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO. 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTIC REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: to top of a sement of y tormer of ne focal Fe ě TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone PULL OR ALTER CASING rest proper change on Form 9-330.) MULTIPLE COMPLETE CHANGE ZONES ABANDON* Surface Rehabilitation (other) 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.)* 5 E # 3 Propose to by July 31, 1979, commence surface rehabilitation on the Liberty Bell #1 as outlined in your letter of July 5, 1979. We anticipate completion by August 31, 1979. Work on this well had not been performed previously because we have a second party obligated to do part of this work and have been unsuccessful in getting them to fulfill their obligation Subsurface Safety Valve: Manu. and Type ाह सहस्रो कि विक्रमित 18. I hereby certify that the foregoing is true and colrect U. S. RMI July-13, 1979 Engineer TITLE DATE (This space for Federal or State office use) Ĕ 5 APPROVED BY _ TITLE Procedures 16 Suppose 16 Suppose 10 Company CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

