## UNITED STATES

Form Approved.				
Budget	Bureau	Nο.	42-R1424/	

ORITED STATES	5. LEASE   Simple Sim
DEPARTMENT OF THE INTERIOR	SF 0803845 = 5 5 5 5
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME: = # 7
(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.)	
1. oil gas	8. FARM OR LEASE NAME 를 결정되는 모든 Sullivan 등 등 보고 있는 기
well well other Dry Hole	9. WELL NO. 9 1 2 3 3 5 5
2. NAME OF OPERATOR	2 25 60 51 88
J. Gregory Merrion, Robert L. Bayless, Atom 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
P.O. Box 1541, Farmington, NM 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR
<ol> <li>LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)</li> </ol>	AREA PORTONO PROPERTY OF THE SECTION 10 FT26N, R12W
AT SURFACE: 790 FEL & 1850 FNL	12. COUNTY OR PARISH 13. STATE 0
AT TOP PROD. INTERVAL:	San Juan New Mexico
AT TOTAL DEPTH:	14. API NO. 25 2 2 5 5 5 6
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
	15. ELEVATIONS (SHOW DE KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	2000
TEST WATER SHUT-OFF	다 전 등
FRACTURE TREAT	an ban Agas Agas Agas Ban Ban Ban Ban Ban Ban Ban Ban Ban Ban
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9–330.) = 🚾 = 😑
MULTIPLE COMPLETE	enoileurden siteaque llew stigeude de de anna en la bout bennach de a site de de de de bade de de de bade de de de bade de de
CHANGE ZONES	roitou hasqo hasqo has st has st st nado state d haste has haste haste haste haste haste haste haste h
ABANDON* [] (other) Surface Rehabilitation	ikoura nago ile nation national national national national national national national
Come y Buttage Indianation	10
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinen	irectionally drilled, give subsurface locations and
We propose to commence rehabilitation of the	
U. S. G. S. letter dated July 5, 1979, and ar	nticipate completion of rehabilita
tion work by August 31, 1979.	
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and the same of th	
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:	CEOLOGICAL USESSA FOR THE SECTION OF
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
SIGNED TITLE Engineer	DATE
(This space for Federal or State offi	
APPROVED BY TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	dend eno eno entre final fin final final final final final final final final final f
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*See Instructions on Reverse S	) 1979   1979
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	ENGINEER ]