

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

1. oil well ☐ gas well ☒ other ☐
2. NAME OF OPERATOR
J. Gregory Merrion and Robert L. Bayless
3. ADDRESS OF OPERATOR
P.O. Box 507, Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990 FSL and 1820 FWL
AT TOP PROD. INTERVAL: same
AT TOTAL DEPTH: same
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:
- TEST WATER SHUT-OFF ☐ ☐
- FRACTURE TREAT ☐ ☒
- SHOOT OR ACIDIZE ☐ ☐
- REPAIR WELL ☐ ☐
- PULL OR ALTER CASING ☐ ☐
- MULTIPLE COMPLETE ☐ ☐
- CHANGE ZONES ☐ ☐
- ABANDON* ☐ ☐
- (other) ☐ ☐

5. LEASE
NM 22046
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Chaco
9. WELL NO.
2
10. FIELD OR WILDCAT NAME
WAW Fruitland Pic. Cliffs
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 7, T26N, R12W
12. COUNTY OR PARISH
San Juan
13. STATE
N.M.
14. API NO.
30-045-22310
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5958 ft. GL

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

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.)*

- 5-13-79 Rig up Western States rig. Pull 1" siphon string out. Run sand line to PBTD 1210 ft. Shut in waiting on frac.
- 5-16-79 Rig up Dowell. Fraced Pictured Cliffs with 2500 lbs. 20/40 sand and 3800 gal. slick water with 1% KCL. Well on vacuum after frac. Shut in waiting on swab rig.
- 5-18-79 Rig up swab rig. Swab well in. Making 100 MCF/day with heavy spray of water. Left blowing.
- 5-19-79 Well loaded up; swabbed in. Ran 1" siphon string and put on line.
- 5-21-79 Well making 20 MCF/day.
- 5-25-79 Well logged off.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED J. Gregory Merrion

TITLE Co-Owner

DATE

June 26, 1979

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Yumac