## Form Approved. 136 1914 17 M 1917 1916 1917

## UNITED STATES DEPARTMENT OF THE INTERIOR

UNITED STATES  DEPARTMENT OF THE INTERIOR	5. LEASE
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 and believe and bel
1. oil	8. FARM OR LEASE NAME TO SEE THE SEE T
well well other  2. NAME OF OPERATOR	1 160 160 160 160 160 160 160 160 160 16
J. Gregory Merrion & Robert L. BAyless  3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME TEE TO THE WAW Fruitland Pictured Cliff
P.O. Box 507, Farmington, NM 87401	11. SEC., T., R., M. OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	Section 17, T26N, R13W 2 N
AT SURFACE: 790 FSL & 790 FWL AT TOP PROD. INTERVAL: same	San Juan 18 5 New Mexico
AT TOTAL DEPTH: Same  16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO. 35 5 1 10 mg do no
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF KDB AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF	100 100 101 101 101 101 101
FRACTURE TREAT	to of old
REPAIR WELL	(NOTE: Report results of multiple completion or zone
MULTIPLE COMPLETE   CHANGE ZONES	change on Form 9-330. Days be stored by the street of the
ABANDON*	emaile de la constant
THE PROPERTY OF COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates,	
including estimated date of starting any proposed work. If well is directionally diffied give substantial bound in measured and true vertical depths for all markers and zones pertinent to this work.)*	
Subsequent to our proposal to abandon this well we made completion as a commercial producer. (Reference form 9-331 of April 26, 1978 and form 2	
9-330 of April 26, 1978) Therefore we would propose to cancer primary	
produce commercial quantities of natural gas.	
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indua tot bangki lasabat sidaal roitointani talaa sidaal roitointani talaa sidaal roitointani alka sidaal roitointani alka sidaal roitointani alka sidaal roitointani alka sidaal roitointani roitoint	
Subsurface Safety Valve: Manu. and Type	<u> </u>
18. I hereby certify that the foregoing is true and correct  Engineer	DATE TULY 9, 1979
SIGNED TO STATE OF Forest for State office use)	
APPROVED BY TITLE	DATE DATE
CONDITIONS OF APPROVAL, IF ANY:	mal mainut anoibhligh anoibhligh anoibhligh anoibhligh and anoibhligh and anoibhligh and anoibhligh anoibhligh
	Sport of the sport
*See Instructions on Reverse Side	
NMOCC	AOYHO DISTINCT ENGINEER