UNITED STATES

5.	LEASE
SI	080384-B
6.	IF INDIAN, ALLOTTEE OR TRIBE NAME

DEPARTMENT OF THE INTERIOR	SF 080384-B
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	7. UNIT AGREEMENT 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 eservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas X other	Hickman 9. WELL NO.
Well Co Well	7
 NAME OF OPERATOR Gregory Merrion & Robert L. Bayless 	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR P.O. Box 1541, Farmington, NM 87401	Wildcat 11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
L. Land	Sec. 3, T26N, R12W
AT SURFACE: 550 FNL & 790 FED	1 27.34
AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: Same	San Juan N.M.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
TO TOUR DEPOSIT OF	5883' GL
KEQUEST TOK ALTHOUSE	
TEST WATER SHUT-OFF U FRACTURE TREAT	
SHOOT OR ACIDIZE	(NOTE: Report results of multiple completion or zone
REPAIR WELL	change on Form 9-330.)
PULL OR ALTER CASING UMULTIPLE COMPLETE	
CHANGE ZONES	•
ABANDON* Amend 9-331c dated 06-05-79 and 9-331 dated 06-05-79	ated 10-10-79
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stational including estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertined.)	Ite all pertinent details, and give pertinent dates, directionally drilled, give subsurface locations and ent to this work.)*
Alter casing program as follows:	
will set 90 ft. of 7", 23 lb./ft., surf. Will set 800 ft. of 4-1/2", 10.5 lb./ft	MAR 2 1/350
	OIL DIST 3
Subsurface Safety Valve: Manu. and Type	Ser @Ft
18. I hereby certify that the for going is true and correct	₩#1 - 1
18. Thereby certify that the loggonies that and service Engineer	DATEMarch 14, 1980
(This space for Federal or State	office use)
(This space for rederal of State	-01/51
APPROVED BY TITLE	DATE TOPRUVED
CONDITIONS OF APPROVAL. IF ANY:	M 1880

*See Instructions on Reverse Side

DISTRICT OIL & GAS SUPERVISOR