Distribution:	: O+4 (BLM-Farmington)	; 1-Well File; 1-Earleen(A	cctng; 1-Geology; 1-Bec	ky(Land)
Form 3160-5 (June 1990) Do not use this	DEPARTMEN BUREAU OF I SUNDRY NOTICES s form for proposals to dr	TED STATES IT OF THE INTERIOR LAND MANAGEMENT AND REPORTS ON WE III or to deepen or reentry R PERMIT—" for such pro	to a different/reservoir.	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. SF-080238A 6. If Indian, Allottee or Tribe Name
	SUBMIT	IN TRIPLICATE		7. If Unit or CA, Agreement Designation
1. Type of Well Oil Gas Well Well Other 2. Name of Operator				8. Well Name and No. Chaco Limited 2
MERRION OIL & GAS CORPORATION 3. Address and Telephone No.				9. API Well No. 30-045-23594
P. O. Box 840, Farmington, NM 87499 (505) 327-9801 4. Locanon of Well (Footage, Sec., T., R., M., or Survey Description) 1800' FNL & 1850' FEL				10. Field and Pool, or Exploratory Area WAW Fruitland P.C.
	26N, R13W		•	11. County or Parish, State San Juan, New Mexico
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA				
TYPE (OF SUBMISSION		TYPE OF ACTION	
===	ce of Interes D E G E G E I I I I I I I I I I I I I I I	Recompletion		Change of Plans New Construction Non-Routine Fracturing
Fine	Abandomen N@IL CON	I. DIV Altering Casi		Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well
13. 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.)* Merrion Oil & Gas Corporation Plugged and Abandoned this subject well as follows:				
January 2, 1	<u>993</u>			
35 sack neat	cement (yield 1.15 cu.ft./s	ack, density 15.6#/gal - 25 D JC Well Service on 1/2/9	sacks pumped 40 psi and 3. WO dry hole marker	BPM at 400 psi. Mix and pump is 10 sacks pumped 800 psi). and surface rehabilitation. SECELYED SAMIL: 25
	the foregoing is true and correct	Liability under is r	of the well bore. stained until ompleted.	MED AM II: 25 ATON, NM
Signed Signed	\/\/\/\	Operations Ma	nager	Date
(This space for Fede	on S. Duni			APPROVED
Approved by Conditions of approv	rai. if any:	Title	MOCD	Date JAN 2 6 1993
Title 18 11 S.C. Service	1001 makes it a crime for any nerson	knowingly and willfully to make to any	department or page of the United	AREA MANAGER

*See instruction on Reverse Side