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Form 3160-5 (June 1990)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED Budget Bureau No. 1004-0135

Expires: March 31, 1993

Lease Designation and Serial No.

1. Type of Well Oil Gas Well Other  2. Name of Operator  Merrion Oil & Gas Corporation (14634)  3. Address and Telephone No. 610 Reilly Avenue, Farmington, NM 87401-2634  4. Location of Well (Footage, Sec., T., R., M., or Survey Description)	If Unit or CA, Agreement Designation
Oil Well X Well Other  2. Name of Operator  Merrion Oil & G2.s Corporation (14634)  3. Address and Telephone No. 610 Reilly Avenue, F2 rmington, NM 87401-2634  4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  790' fsl & 790' fwl (sw sw) Section 10, T26N, R12W  12. CHECK APPROPRIATE BOX (s) TO INDICATE NATURE OF NOTICE, REPORT,  TYPE OF SUBM. SSION  TYPE OF ACTION  X Notice of It tent  Abandonment  Recompletion  Plugging Back	
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610 Reilly Avenue, Farmington, NM 87401-2634  4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  790' fsl & 790' fwl (sw sw) Section 10, T26N, R12W  12. CHECK APPROPRIATE BOX (s) TO INDICATE NATURE OF NOTICE, REPORT,  TYPE OF SUBM SSION  TYPE OF ACTION  X Notice of Is tent  Recompletion  Subsequent Report  Plugging Back	API Well No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  790' fsl & 790' fwl (sw sw)  Section 10, T26N, R12W  12. CHECK APPROPRIATE BOX (s) TO INDICATE NATURE OF NOTICE, REPORT,  TYPE OF SUBM SSION  TYPE OF ACTION    Abandonment   Recompletion     Subsequent Report   Plugging Back	30-045-29685
Section 10, T26N, R12W  12. CHECK APPROPRIATE BOX (s) TO INDICATE NATURE OF NOTICE, REPORT, TYPE OF SUBM SSION  TYPE OF ACTION    Abandonment   Recompletion   Plugging Back	Field and Pool, or Exploratory Area  Basin Fruitland
12. CHECK APPROPRIATE BOX (s) TO INDICATE NATURE OF NOTICE, REPORT,  TYPE OF SUBM SSION TYPE OF ACTION    Abandonment   Recompletion   Plugging Back   Pluggin	County or Parish, State
TYPE OF SUBM SSION  TYPE OF ACTION  Abandonment  Recompletion  Plugging Back	San Juan County,
TYPE OF SUBM SSION  TYPE OF ACTION  Abandonment  Recompletion  Plugging Back	New Mexico
X Notice of Is tent Abandonment Recompletion Plugging Back	OR OTHER DATA
Recompletion  Subsequent Report  Plugging Back	
Subsequent Report Plugging Back	X Change of Plans
	New Construction
Casing Repair	Non-Routine Fracturing
	Water Shut-Off
Final Aban-lonment Notice Altering Casing	Conversion to Injection
Other	Dispose Water
	(Note: Report results of multiple completion on Completion or Recompletion Report and Log form.)
13. Describe Proposed or completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any p.	
give subsurface locations at d measured and true vertical depths for all markers and zones pertinent to this work.)*	
Merrion Oil and Gas proposes to change the pipeline material submitted in the approved sund August 14, 1997 and approved September 18, 1998 (copy attached). We propose to construct polyethylene pipe, Schedule SDR-11, HDS800. The line will be pressure tested with natural gother data provided on the previous sundry will stay the same. Plastic pipe specifications are I Size OD Wall (in) Hydrostatic Design Stress  2" 2.375" 0.216 800 psi  3" 3.5" 0.318 800 psi	as to 100 psi. All
14. I hereby certify that the foregoin; is true and correct Signed Connie S. Dinning (This space for Federal or State office use)  Approved By Title	Date 12/3/98

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## UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 Lease Designation and Serial No.

SF-080384-B

BUREAU OF LAND MANAGEMENT Do not use this form for proposals to drill or to deepen or recentry to a different reservoir.

Use "APPLICATION FOR PERMIT—" for such proposals 6. If Indian, Allottee or Tribe Name 070 FATT 7. If Unit or CA, Agreement Designation SUBMIT IN TRIPLICATE 1. Type of Well Oil Well Gas Well Other 8. Well Name and No. HICKMAN A NO. 3 2. Name of Operator Merrion Oil & Gas Corporation 9. API Well No. 3. Address and Telephone No. 610 Reilly Ave Farmington NM 87401 10. Field and Pool, or Explatory Area ph: (505) 327-9801 **BASIN FRUITLAND** 4. Location of Well (Footage, Sec., ..., R., M., or Survey Description) 790' fsl & 790' fwl (sw sw) 11. County or Parish, State SAN JUAN, NEW MEXICO Section 10, T26N, R12W, NMPM CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 12 TYPE OF SUBMISSION TYPE OF ACTION Abandonment Change of Plans Notice of Intent Recompletion New Construction Plugging Back Non-Routine Fracturing Subsequent Repor Casing Repair Water Shut-Off Altering Casing Conversion to Injection Other Ammend APD Form 3160-3 Final Abandonment Notice 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.)\* Attention Ms. Jackie Neckles As discussed during our on-site inspection, Merrion requests that the access road and pipeline route be ammended to run due north to the existing metering facility for the Hickman A1R well. New access will be ~750' in length. I have attached a topo plat which depicts the new route.

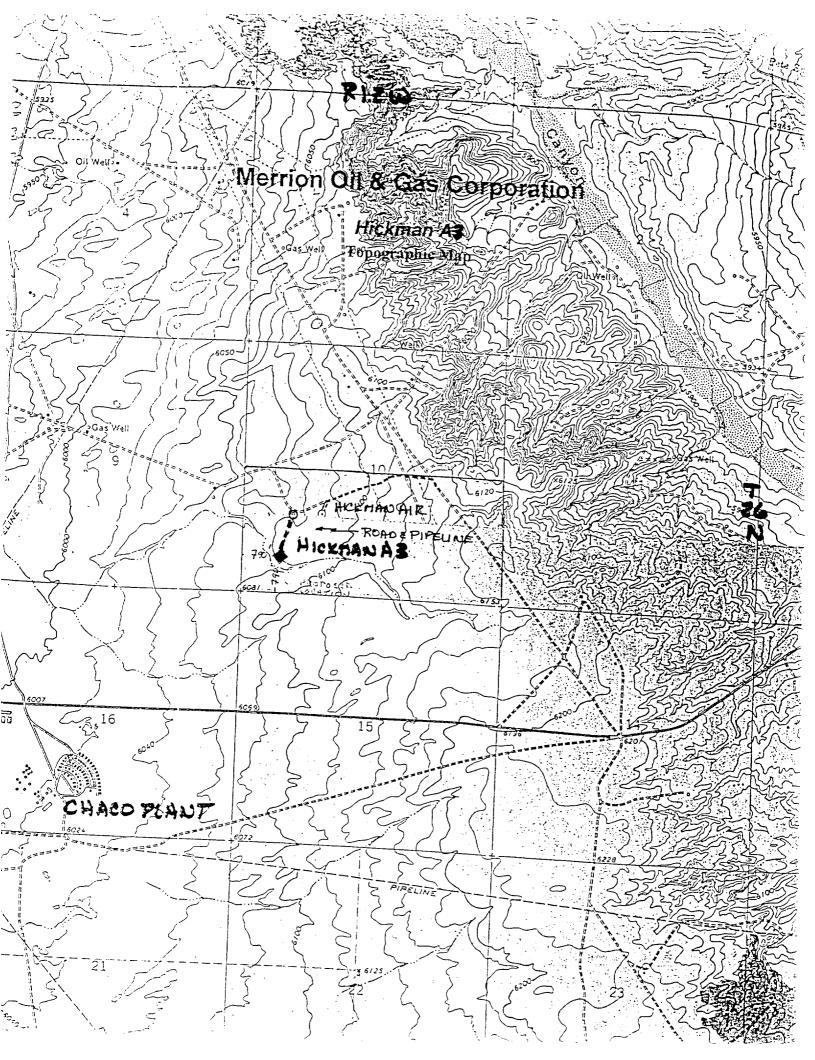
14. I hereby certife Steven S. Dunn (This st

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Title Operations Manager

Date September 4, 1997

Conditions of approval, if any



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## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

RECEIVED

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SF-080384-B

6. If Indian, Allottee or Tribe Name

SUNDRY NOTICES AND REPORTS ON WELLS Constitution of the proposals and dillor to deepen or research and addifferent reservoir.

Use "APPLICATION FOR PERMIT-" for such proposals	
070 FARMINGTON NM SUBMIT IN TRIPLICAT®70 FARMINGTON, NM	7. If Unit or CA, Agreement Designation
I. Type of Well Oil Well Gas Well Other	8. Well Name and No.
2. Name of Operator  Merrion Oil & Gas Corporation	HICKMAN A NO. 3
3. Address and Telephone No. 610 Reilly Ave Farmington NM 87401 ph: (50:5) 327-9801	10. Field and Pool, or Explatory Area BASIN FRUITLAND
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 790' fsl & 790' fwl (sw sw) Section 10, T26N, R12W, NMPM	11. County or Parish, State SAN JUAN, NEW MEXICO
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE PEROP	T OR OTHER BATA

TYPE OF SLIBMISSION	TYPE OF ACTION		
Notice of Intent  Subsequent Report  Final Abandonm int Notice	Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other Ammend APD Form 3160-3	Change of Plans  New Construction  Non-Routine Fracturing  Water Shut-Off  Conversion to Injection  Dispose Water  (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)	

<sup>13.</sup> 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 requests that a gas sales line ROW on-lease be approved as part of the APD process. We have attached a topo map which depicts the route for a gas sales line to the northeast of the proposed location. We propose to tie-in to EPFS's low pressure system near Merrion's Hickman A1R well as shown on the map. This low pressure system has a MAOP of 100 psia; typical operating pressures are in the 40 psi range. The entire route will be located on lease along the proposed well site access road and is about 1100 feet long. The proposed sales line will be buried steel line, either 2-1/2", 3" or 4" depending upon the completion results. Specs for different size lines are included below.

<u>Size</u>	<u>OD</u>	PPF	Wall, in	<u>Yield, psi</u>
2-1/2"	2.875"	5.79	0.203"	4940 psi
3"	3.5"	5.58	0.156"	3120 psi
4"	4.5"	7.24	0.156"	2730 psi

$O_{\alpha}$		COPIES: BLM+4, I	_AND+1, ACTG+1, WELL FILE+1
14. I hereby certify that the foregoing is trul and correct Signed	Steven S. Dunn	Title Operations Manager	Date <u>August 14, 1997</u>
(This space for Federal or State of fice use)  Approved by  Conditions of approval, if any:	Tiue <b></b>	emline	Date 9/18/18