

Form approved
Budget Bureau No. 1001-10
Expires August 31, 1985

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

Use this form for proposals to drill or to deepen or plug back to a different reservoir.
(See APPLICATION FOR PERMIT for such proposals.)

1. WELL NO. X OTHER _____
2. NAME OF OPERATOR
Merrion Oil & Gas Corporation
3. ADDRESS OF OPERATOR
P. O. Box 840, Farmington, New Mexico 87499
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
570' FNL and 670' FEL
14. PERMIT
15. ELEVATIONS (Show whether DF, FNL, or FEL)
5317' DF

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OCT 10 1985

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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5. LEASE DESIGNATION AND SERIAL NO.
14 20 603 2198
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Navajo Trigal H
9. WELL NO.
9
10. FIELD AND POOL, OR WILDCAT
Totah Gallup
11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 23, T29N, R14W
12. COUNTY OR PARISH
San Juan
13. STATE
N. Mex.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEMP. WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐
FRACTURE TREATMENT	☐	MULTIPLE COMPLETION	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT	☐
REPAIRING WELL	☐	CHANGE PLANT	☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☒

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE OPERATIONS OR COMPLETION 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.

Surface rehabilitation completed 9/20/85.

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OCT 17 1985

ACCEPTED FOR RECORD

OCT 15 1985

FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO

18. SIGNATURE (Indicate whether true and correct)

SIGNED: Alan S. Loh TITLE: Operations Manager

DATE: OCT 10 1985

(This space for Federal or State office use)

APPROVED BY: _____ TITLE: _____
CONDITIONS OF APPROVAL, IF ANY:

DATE: OCT 15 1985

*See Instructions on Reverse Side

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