

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL ☒ GAS ☐ OTHER ☐
WELL WELL OTHER
2. NAME OF OPERATOR
Merrion Oil & Gas Corp.
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
660' FNL and 660' FWL

5. LEASE DESIGNATION AND SERIAL NO.
- 0603
14-20-603-7106
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo Tribal
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Waterflow (Navajo)
9. WELL NO.
2
10. FIELD AND POOL, OR WILDCAT
So. Waterflow Gallup
11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 20, R29N, R15W

14. PERMIT NO.
15. ELEVATIONS (Show whether DF, or GL, or SL)
5388' GL
12. COUNTY OR PARISH
San Juan
13. STATE
New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☐
(Other) ☒ P & A Marker

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

17. 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 perti-
nent to this work.) *

The lease number has been permanently installed on the P & A marker.

RECEIVED
JUL 14 1987
OIL CON. DIV.
DIST. 8

ACCEPTED FOR RECORD

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE Operations Manager

DATE 6/16/87

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO
BY an

*See Instructions on Reverse Side