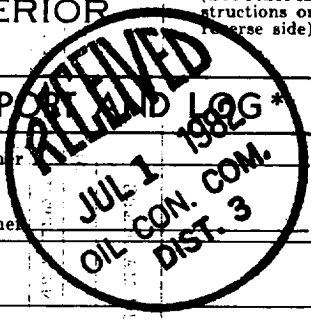


UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT LOG*



1a. TYPE OF WELL:		OIL WELL ☒	GAS WELL ☐	DRY ☒	Other ☐										
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐								
2. NAME OF OPERATOR Merrion Oil & Gas Corporation						5. LEASE DESIGNATION AND SERIAL NO. 14-20-603-5024									
3. ADDRESS OF OPERATOR P. O. Box 1017, Farmington, New Mexico 87401						6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990' FSL and 330' FEL At top prod. interval reported below Same At total depth Same						7. UNIT AGREEMENT NAME									
14. PERMIT NO.						DATE ISSUED									
15. DATE SPUDDED 2/27/81						16. DATE T.D. REACHED 3/2/81									
17. DATE COMPL. (Ready to prod.) To be plugged						18. ELEVATIONS (DF, RKB, RT, GR, etc.)* 5176' G.L. 5189' K5									
19. ELEV. CASING HEAD 5176' G.L.						20. FIELD AND POOL, OR WILDCAT Unders. Gallup									
21. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 30, T29N R17W						22. COUNTY OR PARISH San Juan									
23. STATE New Mexico						24. WAS DIRECTIONAL SURVEY MADE No									
25. TYPE ELECTRIC AND OTHER LOGS RUN Induction and Compensated Density Logs						26. WAS WELL CORED Yes									
27. CASING RECORD (Report all strings set in well)															
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED					
7"		23 #/ft.		64' KB		9-1/4"		12 sx Class A w/3% CACL ₂							
4-1/2"		10.5 #/ft.		599' KB		6-1/4"		85 sx Class B w/1% CACL ₂							
28. LINER RECORD								30. TUBING RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number) None								32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
								DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED					
33.* PRODUCTION															
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)						WELL STATUS (Producing or shut-in) To be plugged							
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.		WATER—BBL.		GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—BBL.		OIL GRAVITY-API (CORR.)			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)								TEST WITNESSED BY							
35. LIST OF ATTACHMENTS															
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all															
SIGNED		TITLE						Operations Manager		DATE		6/15/82			

*(See Instructions and Spaces for Additional Data on Reverse Side)

NMOCC

BY

JUN 21 1982
FARMINGTON DISTRICT
Elliott

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, and/or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 38, below regarding separate reports for separate completions.

and/or State office. See instructions on items 22 and 23, and 24, and 25, below regarding separate reports and attachments. If a summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formations, not filed prior to the time this summary record is submitted, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

should be listed on this form, see item 6b.
Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in Item 22, and in Item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for the interval reported in Item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

[illegible]

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