

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires March 31, 2007**SUNDRY NOTICES AND REPORTS ON WELLS***Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*5. Lease Serial No.
NM-33047

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
Hi Roll No. 3R9. APL Well No.
30-045-2997710. Field and Pool, or Exploratory Area
Basin Fruitland Coal11. County or Parish, State
San Juan**SUBMIT IN TRIPLICATE – Other Instructions on reverse side.**

1. Type of Well

☐

Oil Well

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Gas Well

☐

Other

2. Name of Operator

Merrion Oil & Gas Corporation

3a. Address

610 Reilly Avenue, Farmington, NM 87401

3b. Phone No. (include area code)

505.324.5300

4b. Location of Well (Footage, Sec. T., R., M., or Survey Description)

1110' fnl & 1580' fel

Sec 35, T27N, R13W

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Report	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input checked="" type="checkbox"/> Change Plans	<input type="checkbox"/> Plug & Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomple horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Merrion Oil and Gas received an approved sundry to add the Basin Fruitland Coal to this wellbore dated 11/6/02. We did not complete the work at that time. The Pictured Cliffs was producing a large volume of water, and we did not want to add to that volume by adding the coal.

We now propose to add the coal to the wellbore, but we will plug the Pictured Cliffs as opposed to commingling the two zones. We will set a CICR below the proposed Fruitland Coal perms and pump cement to fill the Pictured Cliffs. We will complete the Fruitland Coal, then drill out the CICR and cement for rat hole.

CONDITIONS OF APPROVAL

Adhere to previously issued stipulations.

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**

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

Name (Printed/Typed)

Connie S. Dinning

Title Production Engineer

Signature

Date August 18, 2005

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title Petr. Eng.

Date 8/30/05

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 USC Section 1001 and Title 43 USC Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NMOCD

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer D9, Artesia, NM 88211-0719
District III
1000 Kin Brazos Rd., Adec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102

Revised February 21, 1994

Instructions on back

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT 23

* API Number 30-045-29977		* Pool Code 71629	* Pool Name Basin Fruitland Coal
* Property Code 07804	* Property Name Hi Roll		* Well Number 3 R
* OGRID No. 014634	* Operator Name Merrion Oil & Gas		* Elevation 5998'

10 Surface Location

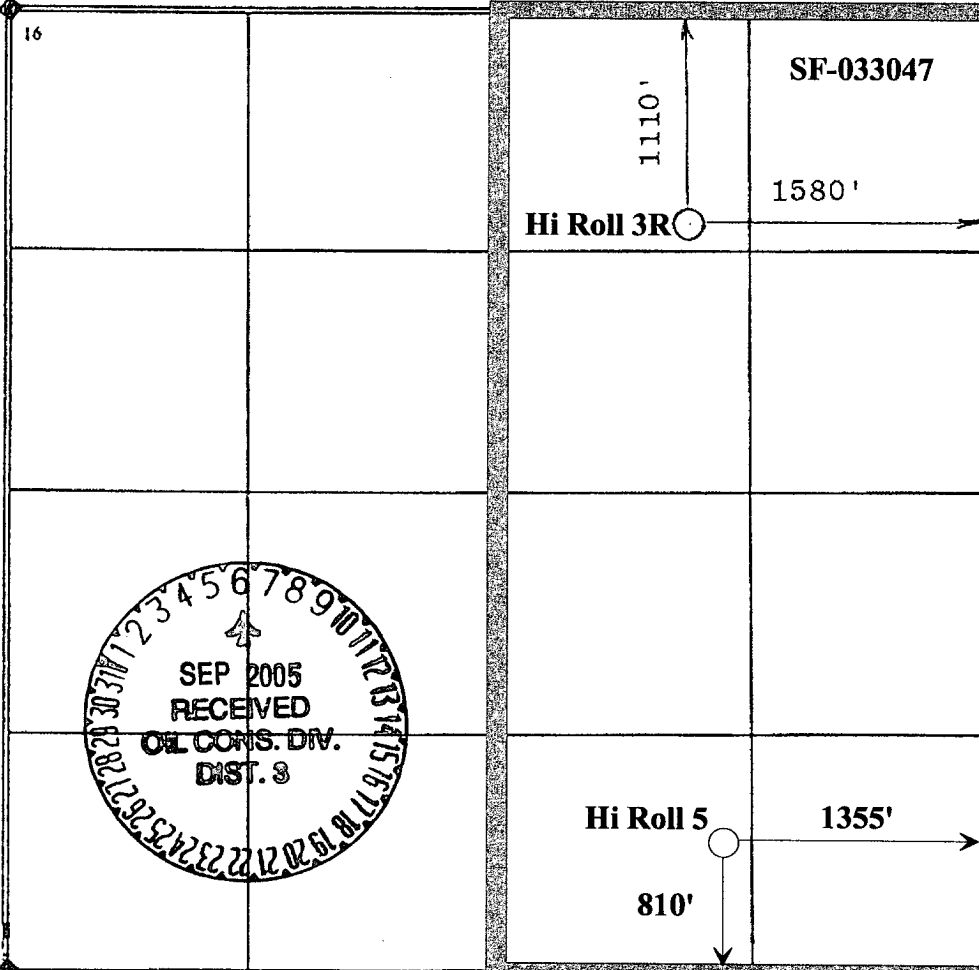
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	35	27 N	13 W	NWNE	1110	North	1580	East	San Juan

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

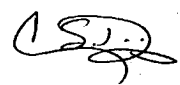
12 Dedicated Acres 320	13 Joint or Infill	14 Consolidation Code	15 Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



17 OPERATOR CERTIFICATION


I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief




Signature _____
Printed Name **Connie S. Dinning**
Title **Production Engineer**
Date **October 31, 2002**

18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.



Date of Survey **September 1999**
Signature and Seal of Professional Surveyor: 
Certificate Number _____

Bureau of Land Management Conditions of Approval:

- 1) If this well is located in a Specially Designated Area (SDA), compliance with the appropriate seasonal closure requirements will be necessary.**
- 2) Pits must be lined with an impervious material at least 12 mils thick. The pit must be fenced on three (3) sides during workover operations and on the 4th side after the rig moves off location. Pits must be closed within 90 days of completion of the workover operations. Prior to closing the pit the liner must be cut off at mud level.**