

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
June 19, 2008

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-045-09393
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Merrion Oil & Gas Corp		6. State Oil & Gas Lease No.
3. Address of Operator 610 Reilly Ave, Farmington, NM 87401		7. Lease Name or Unit Agreement Name Charles Hutton Com
4. Well Location  Unit Letter <u>A</u> : <u>1030</u> feet from the <u>North</u> line and <u>1185</u> feet from the <u>East</u> line  Section <u>23</u> Township <u>30N</u> Range <u>12W</u> NMPM County <u>San Juan</u>		8. Well Number #1
		9. OGRID Number 14634
		10. Pool name or Wildcat Basin DK
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5512'		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input checked="" type="checkbox"/> Re-Delivery	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Spud Date:

Rig Release Date:

Meter #: 73005  
TBG PSI: 940  
CSG PSI: 940  
Rate: 355 (mcf)  
H2O Rate: 0  
Gathering Co.: Enterprise  
Re-Delivery: 3/4/09

RCVD APR 8 '09  
OIL CONS. DIV.  
DIST. 3

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

SIGNATURE Philana Thompson TITLE Regulatory Compliance Specialist DATE 4/2/09

Type or print name Philana Thompson

E-mail address: [pthompson@merrion.bz](mailto:pthompson@merrion.bz)

PHONE: 505-324-5336

For State Use Only

APPROVED BY: Felix G. Rodriguez TITLE Deputy Oil & Gas Inspector, District #3 DATE APR 07 2010

Conditions of Approval (if any):