

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**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.
NMSF078874

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side.7. If Unit or CA/Agreement, Name and/or No.
CANYON LARGO UNIT

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.
CANYON LARGO UNIT 298

2. Name of Operator

MERRION OIL & GAS CORPORATION

Contact: PHILANA P THOMPSON

E-Mail: pthompson@merrion.bz

9. API Well No.

30-039-22426

3a. Address

610 REILLY AVE
FARMINGTON, NM 87401

3b. Phone No. (include area code)

Ph: 505-324-5336

Fx: 505-324-5350

10. Field and Pool, or Exploratory
DEVILS FORK GALLUP

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

Sec 3 T24N R6W NENE 790FNL 790FEL
36.34758 N Lat, 107.44863 W Lon

11. County or Parish, and State

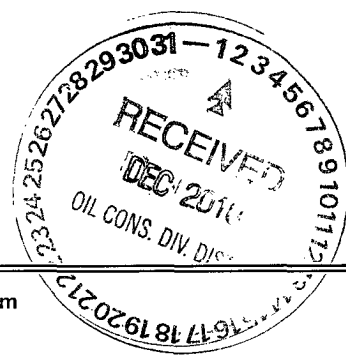
RIO ARRIBA COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Final Abandonmen tice
	<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 recompleat 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 recompleat 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.)

The following location was inspected by Steven Willems with the BLM, and is ready for approval of Final abandonment and release of bond.



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

Electronic Submission #97088 verified by the BLM Well Information System
For MERRION OIL & GAS CORPORATION, sent to the Farmington

Name (Printed/Typed) PHILANA P THOMPSON

Title REGULATORY COMPLIANCE SPEC

Signature (Electronic Submission)

Date 11/09/2010

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <i>SCW</i> <i>Brie Ness</i>	Title Branch Chief	Date <i>11/30/10</i>
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 <i>FFO</i>

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. 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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ******NMOCD**