

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 WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 24964
2. NAME OF OPERATOR Merrion Oil & Gas Corporation	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 840, Farmington, New Mexico 87499	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1785' FNL and 2175' FEL	8. FARM OR LEASE NAME Pot Mesa
14. PERMIT NO.	9. WELL NO. 2
	10. FIELD AND POOL, OR WILDCAT WC Mesaverde
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 10, T20N, R6W
15. ELEVATIONS (Show whether on top of or below ground) 6891' GL	12. COUNTY OR PARISH McKinley
	13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(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 pertinent to this work.)\*

Propose to set 100 ft. cement plug from 2290' KB to 2190' KB to seal off perforated intervals in the Menefee (verbal approval received from Mr. Jim Lovato, BLM, 12/6/85). Will apply for permission to convert well for disposal use.

DEC 20 1985  
OIL CON. DIV.  
DIST. 3

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

SIGNED [Signature] TITLE Operations Manager DATE 12/19/85

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE  DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

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U.S. DEPARTMENT OF AGRICULTURE  
WASHINGTON, D.C. 20250