

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 ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR
Merrion Oil & Gas Corporation
3. ADDRESS OF OPERATOR
P. O. Box 840, Farmington, New Mexico 87499
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

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NOV 01 1985

14. PERMIT NO.
15. ELEVATIONS (Show whether to top of or etc.)
6850' GL
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

5. LEASE DESIGNATION AND SERIAL NO.
NM 24964
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Pot Mesa
9. WELL NO.
4
10. FIELD AND POOL, OR WILDCAT
WC Mesaverde
11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 10, T20N, R6W
12. COUNTY OR PARISH
McKinley
13. STATE
NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) Spud, Surface Casing

(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.)*

Spud 10/29/85, 5:00 PM

Ran 2 joints 8-5/8", 23 #/ft. J-55 surface casing. Set casing at 88' KB with 80 sx Class B 2% CaCl2 (94.4 cu. ft.)

Pressure tested casing to 600 PSI for 30 minutes. Held.

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NOV 06 1985
OIL CON. DIV.
DIST. 3

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

SIGNED

TITLE Operations Manager

DATE 10/30/85

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

OCT 04 1985

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA
D. J. [Signature]
RV

Q3713019

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