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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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 -" (FORM C-101, FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Merrion Oil & Gas Corporation		8. Farm or Lease Name Chapman A
3. Address of Operator P. O. Box 1017, Farmington, New Mexico 87401		9. Well No. 1
4. Location of Well UNIT LETTER <u>F</u> <u>1790</u> FEET FROM THE <u>North</u> LINE AND <u>1830</u> FEET FROM THE <u>West</u> LINE, SECTION <u>29</u> TOWNSHIP <u>23N</u> RANGE <u>6W</u> NMPM.		10. Field and Pool, or Wildcat Lybrook Gallup Ext.
15. Elevation (Show whether DF, RT, GR, etc.) 7105 GL		12. County Sandoval

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:

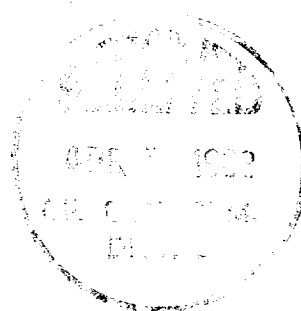
PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER Spud ☒
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. 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.

Spudded 4/4/82. Drilled 12-1/4" hole to 217' KB. Ran 203' 8-5/8" casing set @ 217' KB. Cemented w/170 sx Class 'B', 2% CACL₂.



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

SIGNED <u>Frank T. Chavez</u>	TITLE <u>Operations Manager</u>	DATE <u>4/5/82</u>
Original Signed by FRANK T. CHAVEZ		
APPROVED BY	TITLE <u>SUPERVISOR</u>	DATE <u>APR 7 1982</u>
CONDITIONS OF APPROVAL, IF ANY:		