

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well <input checked="" type="checkbox"/> gas well <input type="checkbox"/> other <input type="checkbox"/>
2. NAME OF OPERATOR Merrion Oil & Gas Corporation
3. ADDRESS OF OPERATOR P. O. Box 1017, Farmington, New Mexico 87499
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 990' FNL and 990' FEL AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: Same
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) TD, casing ☐

SUBSEQUENT REPORT OF:

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RECEIVED
APR 17 1984

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

TD 3/28/84 @ 5925.

Set 4-1/2", 10.5 #/ft. casing @ 5925' KB with 225 sx (274.5 cu. ft.) Class H cement with 2% Gel. 700 sx (1442 cu. ft.) Class B cement with 2% Chemical extender. 100 sx (122 cu. ft.) Class H with 2% Gel.
Wilson Service ran temperature survey. Found top of cement @ 900.

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OIL CON. DIV.
DIST. 3

Subsurface Safety Valve: Manu. and Type _____

Set @ _____ Ft.

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

SIGNED [Signature] TITLE Operations Manager DATE 4/2/84

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

APR 19 1984

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY 5mm

NMOCC