

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
E 1207-6	

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"/>
2. Name of Operator Merrion Oil & Gas Corporation
3. Address of Operator P. O. Box 840, Farmington, New Mexico 87499
4. Location of Well UNIT LETTER <u>K</u> , <u>1995</u> FEET FROM THE <u>South</u> LINE AND <u>2080</u> FEET FROM THE <u>West</u> LINE, SECTION <u>16</u> TOWNSHIP <u>24N</u> RANGE <u>6W</u> NMPM.

7. Unit Agreement Name
8. Farm or Lease Name NCRA State
9. Well No. 7
10. Field and Pool, or Wildcat Devils Fork MV Ext.
12. County Rio Arriba

15. Elevation (Show whether DF, RT, GR, etc.)
7774' GL

16. 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 ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPHS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

Cancellation of APD

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.

Please cancel the APD on this location.

RECEIVED
OCT 06 1986
OIL CON. DIV.,
DIST. 3

ABANDONED LOCATION

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

SIGNED Frank T. Chavez TITLE Operations Manager DATE 10/3/86

APPROVED BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT #2

DATE OCT 06 1986

CONDITIONS OF APPROVAL, IF ANY: