rorm Approved. Budget Bureau No. 42-R1424

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	5. LEASE SF 080136 5 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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.)	7. UNIT AGREEMENT NAME
1. oil gas well other	Salazar Federal G 34
2. NAME OF OPERATOR Merrion Oil & Gas Corporation 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME Devils Fork Gallup
P. O. Box 1017, Farmington, New Mexico 87499 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	11. SEC., T., R., M., DR, BLK. AND SURVEY OR AREA Sec. 34, %25Ng #R6W E 35 55 55
AT SURFACE: 1650' FNL and 1090' FEL AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: Same	12. COUNTY OR PARISH 13. STATE 13. Rio Arriba 13. New Mexico
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6365— GL
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES SUBSEQUENT REPORT OF: SUBSEQUENT	(NOTE: Report results of multiple completion or zone
ABANDON* (other) Plug back Dakota Formation X [5. 8. GEOLOGICAL TOTAL CONTROL OF THE PROPERTY	SURVEY

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.)*

Plugged with 20 sx (23.6 cu. ft.) Class H 1% CaCl₂ with packer set @ 6300' KB. Squeezed perfs to 2500 PSIG leaving cement 100' above perfs.



OIL CON TIME

Subsurface Safety Valve: Manu. and Type					<u> </u>
Cabbanaca cares, variet manar and type				ن ک	,
18. I hereby certify that the foregoing is	true and correct				7 P D 🖺 💎
SIGNED Ato 1	TITLE Operations Manager	DATE	5/17/83	* , *	3 3 3 B
			<u> </u>		
7	(This space for Federal or State office use)			, = -	A Page 1
APPROVED BY	TITLE	DATE _	<u> </u>		
CONDITIONS OF APPROVAL, IF ANY:				. E	
en er er er Skriftette				ت از	
}_			U 37	(1)	

JUN 0 1983

*See Instructions on Reverse Side

