

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.
NM 04073A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Bootstrap Com

9. WELL NO.
No. 1

10. FIELD AND POOL, OR WILDCAT
Undesignated Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 31, T26N, R2W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
NM

RECEIVED
SEP 16 1986

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
1650' FNL and 750' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether by RL, GN, or CG)
8525' GL

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Casing, TD</u>	

(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.)*

TOTAL DEPTH: 8006' KB, 9/10/86

Ran 5.5", 17 and 15.5 #/ft casing. Set casing at 8003' KB with 315 sx Class H 2% gel and 1/4 #/sk Cellophane Flake w/6-1/4 #/sk Gilsonite (412.7 cu. ft.). Circulated between stages.

2nd Stage: 160 sx Class B cement, 2% chemical extender (336 cu. ft.). Tailed in with 50 sx Class H + 2% gel with 1/4 #/sk Cellophane Flake and 6-1/4 #/sk Gilsonite. (65.5 cu. ft.). Stage tool @ 6334' KB

Circulated between stages.

3rd Stage: 150 sx Class B Cement with 2% chemical extender (315 cu. ft.). Tailed in with 50 sx Class H 2% gel and 1/4 #/sk Cellophane Flake and 6-1/4 #/sk Gilsonite (65.5 cu. ft.). Stage tool @ 3998 KB, top of cement?

SEP 19 1986
OIL CONSERVATION DIV.
DIST. 9

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

SIGNED [Signature] TITLE Operations Manager DATE SEP 15 1986

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE SEP 16 1986

CONDITIONS OF APPROVAL, IF ANY: _____

FARMINGTON RESOURCE AREA

BY [Signature]

*See Instructions on Reverse Side

NMOCC