

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF-078886

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. ☒ OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR  
J. Gregory Merrion and Robert L. Bayless

3. ADDRESS OF OPERATOR  
P.O. Box 507, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
990' FNL and 990' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
6536 GL 6546 KB

7. UNIT AGREEMENT NAME  
Canyon Largo Unit

8. FARM OR LEASE NAME

9. WELL NO.  
121

10. FIELD AND POOL, OR WILDCAT  
Devils Fork - MV

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 17, T24N, R6W

12. COUNTY OR PARISH  
Rio Arriba

13. STATE  
N.M.

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) <input checked="" type="checkbox"/> Recompletion	
(Other) <input type="checkbox"/>		(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.)\*

11-06-76 Drilled out upper squeeze. Tripped tubing and swab tested. Water entering at 6 BWPH.

11-08-76 Drilled out lower squeeze.

11-09-76 Pressure tested to 1675 psi with slow bleed off to 1050 in 15 minutes. Tripped tubing and ran Baker Model "R" Packer. Swabbed dry.

11-10-76 Ran Swab. Tubing dry. Pulled tubing and ran open-ended to 930 and spotted 3 sacks Cal Seal plug. Reversed tubing clean at 630. Set tubing open-ended at 375' and squeezed with 35 sacks with 2% CaCl<sub>2</sub>.

11-11 to 11-15-76 Drilled soft cement and waited on cement. Squeeze did not hold. Re-squeezed with 35 sacks cement with 2% CaCl<sub>2</sub>.

11-17-76 Drilled out squeeze and pressure tested to 500 psi. Held OK. Tripped tubing and ran in open-ended. Swabbed dry.

Drilled out Cal Seal plug and cleaned out to retainer. Reversed water from hole with oil. Now preparing to perforate.

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

SIGNED J. Gregory Merrion TITLE Operator DATE Nov. 19, 1976

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

