UNITED STATES

DEPARTMENT OF THE INTERIOR	SF 078877
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME,
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
SUNDA! NOTICES AND INC. Services for proposals to drill or to deepen or plug back to a different	Canyon Largo Unit
(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.)	8. FARM OR LEASE NAME
1 011 - 025 -	Canyon Largo Unit
1. oil gas well other	9. WELL NO.
2. NAME OF OPERATOR	306
Merrion Oil & Gas Corporation	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Devils Fork Gallup
P. O. Box 1017, Farmington, New Mexico 87499	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA 5 5 9
below.)	Sec. 11, T24N, R6W
AT SURFACE: 1850' FSL and 2150' FWL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: Same	Rio Arriba New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
Reform on officer some	6409' GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	- MAR - 12
TEST WATER SHUT-OFF	
FRACTURE TREAT ,	DECEIVED
SHOOT OR ACIDIZE 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日	
REPAIR WELL	(NOTE: Report results of multiple completion of 2000)
PULL OR ALTER CASING U	(1982 ACT 11 1202
MULTIPLE COMPLETE	THE STATE OF COME DIV
ABANDON* BURLAU OF LA	RESOURCE AREA OLL CON. DIV.
(other) TD, Casing	DIST. 3
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertined	
TD 5704' KB 10/2/83.	1.1 005 (074 F
Ran 4.5", 11.6 #/ft casing set @ 5704' KB w	vith 225 sx (2/4.5 cu. it.) Class
H cement with 2% D-20. 700 sx Class B (144	12 cu. ft.) with 2% D-79. 1100
sx (122 cu. ft.) Class H with 2% D-20.	
Circulated trace of cement to surface.	
	电极电阻 医二氯甲基
	ing the second of the second o
Subsurface Safety Valve: Manu. and Type	Set @ Ft
18. I hereby certify that the foregoing is true and correct	
The Operations M	Managenare $10/5/83$
SIGNED THE OPERAGE.	
(This space for Federal or State of	ffice use)
APPROVED BY TITLE	DATE DATE
CONDITIONS OF APPROVAL, IF ANY:	ACCEPTED FOR RECORD
	OCT 07 1983
*See Instructions on Reverse	
- See Instructions on Reversi	e Side

FARWHINGTON RESOURCE AREA BY Synm