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1.	OIL GAS X OTHE	R
2.	NAME OF OPERATOR	_
	J. Gregory Merrion	а
3.	ADDRESS OF OPERATOR	_

UNITED STATES

SUBMIT IN TRIPLICATES (Other instructions on re-

Form approved. Budget Bureau No. 42-R1424.

J. Gregory Merrion and Robert L. Bayless Advances of Overators P.O. Box 1541, Farmington, NM 87401 4. Location of white (Report location clearly and in accordance with any State requirements.* At surface 10. Field and Pool, On Well (Report location clearly and in accordance with any State requirements.* At surface 11. ELEVATIONS (Show whether DT, RT, GR, etc.) 12. COUNTY OR PARISH 13. COUNTY OR PARISH 14. COUNTY OR PARISH 15. COUNTY OR PARISH 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Date NOTICE OF INTENDED TO: THAT WATER SHUT-OFF PRACTICE THEAT SHOOT OR ACTIONE BROOT OR ACTIONE BROOT OR ACTIONE BROOT OR ACTIONE BROOT OR ACTIONE CHANGE PLANS (Other) 17. Descants Indicate Nature of Notice, Report, and ALTERING CARD ALTERING (Other) COCHO COCHO COCH	ON AND SERIAL NO.
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