

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
Other instructions on the
reverse B-107

Form approved
Budget Bureau No. 100-101
Expires April 30, 1985

5. LEASE DESIGNATION AND SERIAL NO.

SF 078391 C

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 section.
Use "APPLICATION FOR PERMIT" for such proposals.

RECEIVED

OCT 10 1985

WELL TYPE: WELL OTHER

NAME OF OPERATOR

Merrion Oil & Gas Corporation

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

8. FARM OR LEASE NAME

Hugh Lake

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

WAW Pictured Cliff

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 36, T27N, R13 W

12. COUNTY OR PARISH | 13. STATE

San Juan | New Mexico

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5981' 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

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACURE TREAT.

MULTIPLE COMPLETE

FRACURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANE

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. GENERAL NOTES ON SUSPENDED OR COMPLETED OPERATIONS: (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any pending work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Surface rehabilitation completed 9/1985.

RECEIVED

OCT 17 1985

ACCEPTED FOR RECORD

OCT 15 1985

FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO

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

SIGNED: *Arthur J. ...*

TITLE Operations Manager

DATE 10/8/85

(This space for Federal or State office use)

APPROVED BY: _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

BY: *all*

*See Instructions on Reverse Side