

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS <input type="checkbox"/> OTHER <input type="checkbox"/> WELL WELL | | 5. LEASE DESIGNATION AND SERIAL NO. 14-20-603-2198 |
| 2. NAME OF OPERATOR J. Gregory Merrion and Robert L. Bayless | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribe |
| 3. ADDRESS OF OPERATOR P.O. Box 507, Farmington, New Mexico 87401 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 810' FNL & 660' FEL | | 8. FARM OR LEASE NAME Navajo H |
| 14. PERMIT NO. | | 9. WELL NO. 2 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5378 GL | | 10. FIELD AND POOL, OR WILDCAT Totah Gallup |
| 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 24 T29N, R14W |
| | | 12. COUNTY OR PARISH San Juan |
| | | 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 type="checkbox"/> | |

(Other) Temporarily Abandon

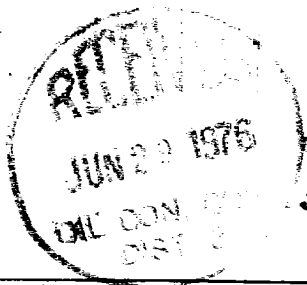
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

Bradenhead Test indicates no casing failure.

Request permission to hold as temporarily abandoned for one year while evaluating shallower recompletion attempts and/or further Gallup producing potential.

TEMPORARY ABANDONMENT
EXPIRES JUN 1 1977



JUN 22 1976

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

SIGNED J. Gregory Merrion TITLE Operator DATE June 24, 1976

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____