Form 3160-5
November 1983
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE* (other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.: 14 20 603 2198

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Navajo

7. UNIT AGREEMENT 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.)

WELL X WELL OTHER

2. NAME OF OPERATOR: Merrion Oil & Gas Corporation

8. FARM OR LEASE NAME: Navajo Tribal B

3. ADDRESS OF OPERATOR: P. O. Box 840, Farmington, New Mexico 87499

9. WELL NO.: 11

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

RECEIVED
OCT 10 1985
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

2090' FNL and 1840' FEL

10. FIELD AND POOL, OR WILDCAT: Cha Cha Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 14, T29N, R14W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 5204 GL

12. COUNTY OR PARISH: San Juan 13. STATE: New Mexico

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	
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING	
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING		ABANDONMENT*	X
REPAIR WELL		CHANGE PLANS		(Other)			
(Other)							

(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.)*

Surface rehabilitation completed 9/20/85.

ACCEPTED FOR RECORD

RECEIVED
OCT 15 1985
OCT 17 1985
FARMINGTON RESOURCE AREA
OIL CON. DIV.
DIST. 3

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

SIGNED [signature] TITLE Operations Manager DATE 10/8/85

(This space for Federal or State office use)

APPROVED BY TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

OCT 15 1985

*See Instructions on Reverse Side

NMOCD

FARMINGTON RESOURCE AREA
NEW MEXICO