

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐ other ☐
well well

2. NAME OF OPERATOR
Lewis Energy Corporation

3. ADDRESS OF OPERATOR
1801 Broadway, Ste 1600 Denver, CO 80202

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990' FWL & 990' FSL FSL --- Sec. 8
AT TOP PROD. INTERVAL: Same as above
AT TOTAL DEPTH: Same as above

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

(other) Progress Report

SUBSEQUENT REPORT OF:

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RECEIVED

NOV 18 1981

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

5. LEASE
N00 - C - 14 - 20 - 5829

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Lopez

9. WELL NO.
No. 1

10. FIELD OR WILDCAT NAME
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 8, T20N R4W, NMPM

12. COUNTY OR PARISH
Sandoval

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6834' GR 6844' KB

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.)*

Using cable tools, drilled out of 7" casing set at 3836'. Encountered water flow @ 3841' and could not drill any deeper. R/D calbe tools - RUWOR w/ power swivel. Finished drlg to TD 4800'. Ran logs: DIL/CDN, GR. Ran and set 4 1/2" liner from 3668' - 4800". Cemented w/55 sx 50/50 Pos. Perforated 4030'-4080' w/2 spf. Acidized perms w/2000 gal 15% HCl. Swab back acid and load water. Swab tested 120 bbls water in 10 hours. SI well and released completion unit. Temporarily Abandoned ----- pending further evaluation.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Richard D. Smith TITLE VP Operations DATE _____

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

JAN 4 1982

FARMINGTON DISTRICT

BY [Signature]

*See Instructions on Reverse Side

NMOCG