

AMENDED REPORT

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424UNITED 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 ☐
well well other

2. NAME OF OPERATOR

Lewis Energy Corporation

3. ADDRESS OF OPERATOR

232 N. Schwartz, Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 660' FNL 990' FWL

AT TOP PROD. INTERVAL: Same

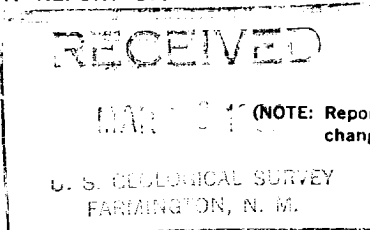
AT TOTAL DEPTH: Same

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) Liner & Cementing

SUBSEQUENT REPORT OF:

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(NOTE: Report results of multiple completion or zone change on Form 9-330.)

5. LEASE

NM 36936

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

None

7. UNIT AGREEMENT NAME

None

8. FARM OR LEASE NAME

San Isidro

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Wildcat Gallup

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

Sec 15-T20N-R3W

12. COUNTY OR PARISH

Sandoval

13. STATE

New Mexico

14. API NO.

None

15. ELEVATIONS (SHOW DF, KDB, AND WD)

6855 GR

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.)*

Drilled 6-1/4" hole to 4350'. Ran 17 jts., 4-1/2" 10.5, J-55, Liner (712.49).
 Top of liner @ 3638'. Bottom of liner @ 4346'. Cemented w/150 sx 50/50
 poz mix + 2% gel. Reversed out 5 bbls. Work was performed on 4/30/81.

Subsurface Safety Valve: Manu. and Type _____

Set @ _____ Ft.

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

 SIGNED Zachary C. Lewis TITLE Operations Manager DATE 3/15/82

(This space for Federal or State office use)

 APPROVED BY _____ TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

MAR 22 1982

FARMINGTON DISTRICT

BY GM

*See Instructions on Reverse Side

NMOCC