

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 ☐
well well other

2. NAME OF OPERATOR

LEWIS ENERGY CORPORATION

3. ADDRESS OF OPERATOR

232 North Schwartz, Farmington, New Mexico

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

AT SURFACE: 660' FNL and 990' FWL

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) Plug back in same zone. ☐

SUBSEQUENT REPORT OF:

☐

☐

☐

☐

☐

☐

☐

☐

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

Section 15-T21n-R3W

12. COUNTY OR PARISH

Sandoval

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6855 GR.

RECEIVED

NOV 9 1981

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

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

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.)*

After testing "A", "B" and "C" zones of the Gallup formation, it was decided to produce the "A" zone by itself. A cast iron bridge plug was set at 4000' and 10' of cement placed above plug with a dump bailer. Plug back depth is 3990'. Well was plugged back on August 6, 1981.

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

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

SIGNED Jack Lewis TITLE Operations Manager DATE November 4, 1981

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

ACCEPTED FOR RECORD

NOV 9 1981

FARMINGTON DISTRICT

BY Sch

*See Instructions on Reverse Side

OPERATOR