

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ 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\* ☐

SUBSEQUENT REPORT OF:

- ☐  
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(other) Plug back in same zone.

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  
20  
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.

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

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 \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED FOR RECORD  
NOV 10 1981  
BY SNH

\*See Instructions on Reverse Side

NMOCC