

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 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.

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-T²⁰21n-R3W

12. COUNTY OR PARISH Sandoval 13. STATE New Mexico

14. API NO.

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

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

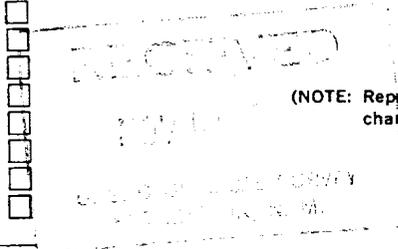
MULTIPLE COMPLETE

CHANGE ZONES

ABANDON*

(other) Plug back in same zone.

SUBSEQUENT REPORT OF:



(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