

**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 660' FWL  
AT TOP PROD. INTERVAL: Same as above  
AT TOTAL DEPTH: Same as above

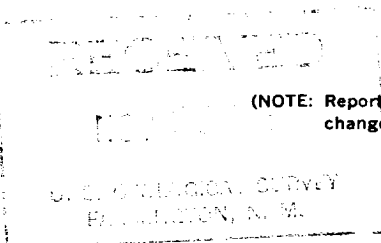
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

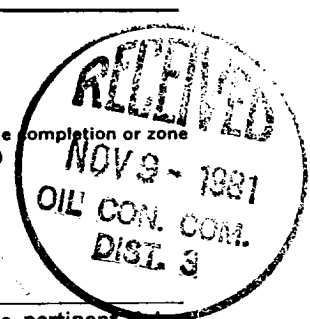
- TEST WATER SHUT-OFF
- FRACTURE TREAT
- SHOOT OR ACIDIZE
- REPAIR WELL
- PULL OR ALTER CASING
- MULTIPLE COMPLETE CHANGE ZONES
- ABANDON\*
- (other)

SUBSEQUENT REPORT OF:

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



5. LEASE  
NM 29169

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
None

7. UNIT AGREEMENT NAME  
None

8. FARM OR LEASE NAME  
Lewis 28-21-3

9. WELL NO.  
#1

10. FIELD OR WILDCAT NAME  
Wildcat Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Section 28-T21N-R3W

12. COUNTY OR PARISH | 13. STATE  
Sandoval | New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
7020 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.)\*

After 14 hours, the DV tool was drilled out. The 7" casing was then tested to 1500 psi for 30 minutes with no decline in pressure. After drilling out cement and casing shoe a 6 1/4" hole was drilled with air to 4760'. TD was reached on October 18, 1981 at 7:30 p.m.

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:

ACCEPTED FOR RECORD

\*See Instructions on Reverse Side

NOV 06 1981

NMOCC

FARMINGTON DISTRICT  
BY Dean Elliott