DEPARTMENT OF THE INTERIOR	5. LEASE SE-079150
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9-331-C for such proposals.)	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME
1. oil gas 📉	PLC OCE Federal
Well — Well	1-19 ## # # # # # # # # # # # # # # # # #
2. NAME OF OPERATOR Petro Lewis Corporation	10. FIELD OR WILDCAT NAME 실 국구를
3. ADDRESS OF OPERATOR P. O. Box 2250	Blanco Pictured Chiffs
717 17th Street, Denver, CO 80201	11. SEC., T., R., M. OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	Section 19 g T23N RIW
below.) AT SURFACE: 1600' FSL & 1600' FEL (NWSE)	12. COUNTY OR PARISH 13. STATE 3
AT TOP PROD. INTERVAL: Same	Sandoval Sage News Mexico
at total depth: Same	14. API NO. 34 5 30 5 6 5 5 5
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-013-20596
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	#9 # # # # # # # # # # # # # # # # # #
FRACTURE TREAT	
REPAIR WELL	(NOTE: Report results of multiple completion or zone change on Form 9–330.) 또 기술등 등 등 등 등
PULL OR ALTER CASING	그 사람들은 그를 가는 것이 되었다. 그는 그는 그를 모르는 그를 모르는 것이 되었다.
CHANGE ZONES 🔲 🔲 📜 🗓 🛈 G. G. GERNORE	The second control of
ABANDON* (other) Production Casing FARABLES	
(0,1,0)	
17. DESCRIBE PROPOSED OR COMPLETED OF ERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is comeasured and true vertical depths for all markers and zones pertined	nt to this work.)*
9-24-81: Reached TD of 3175 feet, ran o	
9-25-81: Ran 82 jts. 4-1/2" 10.5# K-55	STC casing fital lying 3193 feet,
α +	(CICL SY CLISSES SE - COMOTO MA OT
4% Gel followed by 200 sx Clas	SS "A" Cement www.m z/ Caoxz.
Depths are K.B. Cement top	at 1000'. Properties of the pr
	- 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (
	at 1000' • 1000' in the second of the second
	Minute in the control of the control
	그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
	12 12 12 12 12 12 12 12 12 12 12 12 12 1
Subsurface Safety Valve: Manu. and Type	- Set (W 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
18 I hereby festify that the foregoing is true and correct	Super

DATE . _ TITLE ._

(This space for Federal or State office use)

APPROVED BY ______CONDITIONS OF APPROVAL, IF ANY:

Agent

*See Instructions on Reverse Side

And the profession of the prof

MAR 15 1982

FARMINGTON DISTRICT SMh