Form Approved. ⋄ Budget Bureau No. 42–R1424

UNITED STATES

UNITED STATES DEPARTMENT OF THE INTERIOR	5. LEASE # 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(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.)	8. FARM OR LEASE NAME
1. oil gas 🔀 other	I Torance years
2. NAME OF OPERATOR	€ A // €. # # # # # # # # # # # # # # # # # #
Petro-Lewis Corporation	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR 717-17th St., P.O. Box 2250, Denver, Colo., 80201	Basin Dakota ਵਿੱਚ ਪ੍ਰੈਲ ਕਿ ਜਿਹੜੀ 11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA GO
below.)	{
AT SURFACE: 2030 FNL & 1000 FWL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE 19
AT TOTAL DEPTH: Same	Rio Arriba Rew Mexico 14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-039-22865 3 3 8 8 8 8 8
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
	7352 K.B. 583 8 8 8 8 8
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
SHOOT OR ACIDIZE	The state of the s
REPAIR WELL	(NOTE: Report results of multiple completion or zone change on form 9–330.)
PULL OR ALTER CASING UMULTIPLE COMPLETE	
CHANCE TONES	OURCAG SURVEY DESCRIPTION OF THE STATE OF TH
ABANDON*	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinent	irectionally drilled, give subsurface locations and
measured and true vertical depths for all markets and zones pertinen	မွန်မြော်များမှု သွေးသည်။ မွန်မြော်များမှု သွေးသည်။
Plug back T.D. 8390' K.B.	
- 0.00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.000 P D D 0.000 P D 0.00
Ran 8121' of 2 3/8" 4.7# Tubing and landed	చెందు. మనా కు క్రాంటించి
on a ± S → S → S → S → S → S → S → S → S → S	
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	and subtributed by the state of
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	Ten of series of body series of body series of
Subsurface Safety Valve: Manu. and Type	Set @
18. I hereby certify that the toregoing is true and correct	######################################
SIGNED Jule Clarke TITLE Agent	DATE 3-15-1982 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
(This space for Federal or State off	
	요## 경화인
APPROVED BY	
	ACCEPTED FOR RECORD
*See Instructions on Reverse	MAR 16 1982

NMOCC

FARMINGTON DISTRICT SMA

BY_