In Lieu of Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

1. T	Type of Well Oil Well Name of Operator Edwards Enery Cor Address and Telephon 1401 17th Street., St Location of Well (Foo 990' FNL & 1650' F	DE Gas Well p. e No. uite 1400 Denver,	T IN TRIPLIC		COTEN NM	6. N/A 7. SCR 8. Kirb	Well Name and No. y Federal #1- API Well No.
2. P 1 3. 4	Oil Well Name of Operator Edwards Enery Corp Address and Telephon 1401 17th Street., St. Location of Well (Foo	DE Gas Well p. e No. uite 1400 Denver,	□ Other		OENWE	N/A 7. SCR Kirb	If Unit or CA, Agreement Designation - 196 Well Name and No. by Federal #1
2. P 1 3. 4	Oil Well Name of Operator Edwards Enery Corp Address and Telephon 1401 17th Street., St. Location of Well (Foo	DE Gas Well p. e No. uite 1400 Denver,	□ Other	PATE	OF INTE	SCR 8. Kirb	- 196 Well Name and No. by Federal #1 API Well No.
2. P 1 3. 4	Oil Well Name of Operator Edwards Enery Corp Address and Telephon 1401 17th Street., St. Location of Well (Foo	p. e No. uite 1400 Denver,		Police	OF INTE	Kirb	API Well No.
2. 1 1 3. 4	Name of Operator Edwards Enery Corp Address and Telephon 1401 17th Street., St Location of Well (Foo	e No. nite 1400 Denver,	CO 80202		Will B 100	(a) March	
3.	Address and Telephon 1401 17th Street., St Location of Well (Foo	e No. nite 1400 Denver,	CO 80202	177	Sign of	7.7	045-22143
	Location of Well (Foo			(303) 298-1400	TILL GOVE	3 10. WA	Field and Pool, or Exploratory Area W Fruitland / Pictured Cliffs
			A., or Survey [Description)	Office Consum	11.	County or Parish, State 1 Juan, NM.
				(s) TO INDICATE NAT	TURE OF NOTICE, RE	PORT, OR O	THER DATA
	TYPE OF SUBM					E OF ACTION	
	☐ Notice of Intent			☐ Abandonment ☐ Recompletion			☐ Change of Plans ☐ New Construction ☐ Non-Routine Fracturing
	⊠ Subsequent Report ☐ Final Abandonmen			☐ Plugging Back ☑ Casing Repair ☐ Altering Casing ☐ Other	3		☐ Water Shut-Off ☐ Conversion to Injection ☐ Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
13.	Describe Proposed or is directionally drilled	Completed Operat d, give subsurface l	ions (Clearly stocations and m	tate all pertinent details, a easured and true vertical	and give pertinent dates depths for all markers a	including esti nd zones perti	mated date of starting any proposed work. If we
Work	Summary:						
1	2/1: Set RBP &	isolate hole be	tween 662'	- 695'. Squeeze w	/ 145 sx. Circulat	e 5 bbls of o	cement.
1	2/2: Drill out cer	ment & pressui	e test. Did	not hold.			
1	2/3: Isolate hole	in same place	, squeeze v	v/ 12 sx. Maximun	n pressure 1000#		
			re test. Dic	not hold. Hole in	same place. Sque	eze w/ 15 s	SX.
	2/7: Drill out ce			0	COULDD 6.1	40 I	
1	2/8: Pressure tes	st casing - held	OK. Relea	ase RBP & re-run th	bg. SWI. KD&F	AOL.	
Ple construc	ase see attached	chart of presence late Decem	sure test. '	The well is curren	tly shut in and w	aiting com	pletion of the pipeline. The pipelin

NUCEPTED FOR RECOKL

JAN 05 1999

Date

Date

John C. Thompson) Title

Agent

Title

I hereby certify that the tregoing is true and correct

(This space for Federal or State office use)

Conditions of approval, if any:

14.

Signed

Approved by

