

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYForm Approved.  
Budget Bureau No. 42-R1424

## 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 ☐ gas ☒ well other

## 2. NAME OF OPERATOR

ENERGY RESERVES GROUP, INC.

## 3. ADDRESS OF OPERATOR

P.O. BOX 3280 CASPER, WYOMING

## 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

1620' 790' NE  
AT SURFACE: 1590' FSL and 1760' FEL (NW-SE)  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

## 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) Well History ☒

## SUBSEQUENT REPORT OF:

RECEIVED

JUN 10 1980

U. S. GEOLOGICAL SURVEY  
WASHINGTON, D. C.

(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.)\*

The above referenced well was spudded at 9:30 p.m. 3-25-80.

Drilled 12 1/4" hole to 816' and set 20 jts. of 8-5/8", 24#, K55, R3, ST&C, new casing at 807' KB. Cemented w/550 sx class "B" cement w/3% CACL<sub>2</sub> and 1 1/2% sk celloflake. Plug down at 6:15 p.m. - 3-26-80

Good cement returns

Nippled up and pressure tested BOPE to 1000 PSI - Held OK.

3-28-80. Drilg 7-7/8" hole @ 2338'

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

## 18. I hereby certify that the foregoing is true and correct

SIGNED N. D. Thomas TITLE Drilg Foreman

DATE

March 28, 1980

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

FARMINGTON DISTRICT

BY \_\_\_\_\_