|  |   |   |  | Form approved. Budget Bureau N  |               |  |
|--|---|---|--|---|---------------|--|
| (November 1983)  |   |   | SUBMIT IN TRIPLICATE® (Other instructions on re-                     | Expires August :  5. LEASE DESIGNATION A  |               |  |
| (Formerly 9-331)   | BUREAU OF LAND MANAGEMENT   |   |  | NM-03153 /  |               |  |
| SUNDI<br>(Do not use this for  | NOTICES A   | AND REPORTS                                   |  | 6. IF INDIAN, ALLOTTEE  | OR TRIBE NAME |  |
| 1.   |   |   |  | 7. UNIT AGREEMENT NAME  |               |  |
| OIL SAB OTHER  2. NAME OF OPERATOR   |   |   |  | 8. FARM OR LEASE NAME   |               |  |
| Energy Reserves Group, Inc.  |   |   |  | O. H. Randel  |               |  |
| 3. ADDRESS OF OPERATOR P. O. Box 3280 Casper, Wyoming 82602  |   |   |  | 9. WELL NO.   |               |  |
| P. O. Box 3280   | Casper, Wyo   | ming 82002                                    | State requirements.  | 12<br>10. FIELD AND POOL, OR  | WILDCAT       |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with ant State requirem vts.)  See also space 17 below.)  At surface  UL 3 1 1985 |   |   |  | Gallegos Gallup   |               |  |
|  |   |   |  | 11. SEC., T., E., M., OR BLK. AND<br>SURVEY OR AREA   |               |  |
| 1670' FNL & 1690' FEL (SW-NE)  BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA  |   |   |  | Section 15 T2   |               |  |
| 14. PERMIT NO.   |   | EVATIONS (Show whether 6366' - KB 63          |  | San Juan  | New Mexico    |  |
| 16.  |   |   | Nature of Notice, Report, or (                                       | Other Data  |               |  |
| NOT  | •••   |   |  | QUENT REPORT OF:  |               |  |
| TEST WATER SHUT-OFF  | X PULL OR   | ALTER CASING                                  | WATER SHUT-OFF   | REPAIRING W   | TELL          |  |
| FRACTURE TREAT   | <del></del>   | COMPLETE                                      | FRACTURE TREATMENT   | ALTERING CA   | BING          |  |
| SHOOT OR ACIDIZE   | ABANDON   | •   | SHOOTING OR ACIDIZING  | ABANDONMEN  | T*            |  |
| REPAIR WELL (Other)  | CHANGE  | PLANS   | (Norg: Report result   | (Other) (Norm: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) |               |  |
| K.B. Ran 7 its   | 8 5/8", 24#;  | , K-55, ST&C, I<br>1/2% CaCl <sub>2</sub> and | 0:00 P.M. 7-26-85. D<br>R-3 casing set @ 307'<br>1/4# Celloflake/sx. | K.B. Cemented w   | /250 sx       |  |
| 7-27-85 W.O.C.   |   |   |  |   |               |  |
|  |   |   | A SEE SED  |   |               |  |
|  |   |   | €c° &  | AUG 0 6 1985 🖁  | 9             |  |
| OIL CON. DIV.  |   |   |  |   |               |  |
|  |   |   |  | DIST. 3   |               |  |
| 18. I hereby certify that the  | e foregoing is true a   |   | Drilling Foreman   | DATE 7-2  | 9-85          |  |
| SIGNED N. D.   | SIGNED N. D. Thomas  (This space for Federal or State office use) |   |  |   |               |  |
| MYMY E   |   |   |  | ACCEPTED FOR RECORD   |               |  |
| CONDITIONS OF APP  | ROVAL, IF ANY:  |   |  | AUG OR I  | <b>48</b> 5   |  |

\*See Instructions on Reverse Side

NMOCC

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.