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UNITED STATES	5. LEASE សគ្គិទី	
EPARTMENT OF THE INTERIOR	SF-078109 중중합병	
GEOLOGICAL SURVEY	6. IF INDIAN, ALL OTTEF OR	

UNITED STATES	5. LEASE (2. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18
DEPARTMENT OF THE INTERIOR	SF-078109 विद्वारित है विश्वर
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 differen eservoir, Use Form 9–331–C for such proposals.)	
eservan, discreting dor o lot saon proposition	8. FARM OR LEASE NAME
1. oil gas defined other	9. WELL NO.
2. NAME OF OPERATOR	322
Energy Reserves Group, Inc.	
3. ADDRESS OF OPERATOR	- Gallegos Canyon-West Kutz Pictured Cliffs
Box 3280 Casper, Wyoming 82602	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	7 AREA Sec. 31, T29N-R12W
below.) AT SURFACE: 1790' FNL & 1165' FEL	
AT TOP PROD. INTERVAL;	12. COUNTY OR PARISH 13. STATE S
AT TOTAL DEPTH:	34 40100
6. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE	===
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
	a AX No. 1
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: EST WATER SHUT-OFF RACTURE TREAT SHOOT OR ACIDIZE PULL OR ALTER CASING	
EST WATER SHUT-OFF	-01
SHOOT OR ACIDIZE	190'
REPAIR WELL	(NOTEX Report esults of multiply complete provides
PULL OR ALTER CASING	CICAL N. change on Form 9-330)
CEPAIR WELL PULL OR ALTER CASING	
BANDON*	
other) Change Casing Program 0. F	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly st	ate all pertinent details, and give pertinent dates,
including estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertin	directionally drilled, give subsurface locations and ent to this work.)*
It is proposed to change the casing	program on the above referenced
well.	
F 01 1001 0 E/011 214 V 55	Service Note Chaine and
From - 0'-120' - 8-5/8" - 24# - K-55 To - 0'-120' - 7" - 17# - H-40 - ST8	C = New Casing & Casing & Casing
10 - 0 -120 - / - 1/4 - 11-40 - 316	
	기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기
	0.00 c c c c c c c c c c c c c c c c c c
	#무료용한 함께 등의교기 당한분성의 등의 등인교기
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
1	4 7 2 4 5 5 8 8 6
18. I hereby certify that the foregoing is true and correct	
SIGNED TITLE Field Servi	ices Adm. 2-23-81 3=
<u> </u>	實際公開 医二甲酚酚

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY.

DATE

*See Instructions on Reverse Side

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