

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 well ☐ gas well ☒ other
2. NAME OF OPERATOR
Energy Reserves Group, Inc.
3. ADDRESS OF OPERATOR
P.O. Box 3280 - Casper, Wyoming 82602
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1,520' FNL & 880' FWL
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:

☒
☐
☐
☐
☐
☐
☐
☐
☒

5. LEASE
SF-078926
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
Gallegos Canyon Unit
8. FARM OR LEASE NAME
9. WELL NO.
320 325
10. FIELD OR WILDCAT NAME
Kutz Pictured Cliffs West
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA
Sec. 35-T29N-R13W
12. COUNTY OR PARISH
San Juan
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
G.L. 5,855'; K.B. 5,857'

(NOTE: Report results of multiple completion or zone change on Form 9-331-C.)

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 @ 3 AM 4-7-81.

Drilled 9-7/8" hole to 125'. Ran 3 jts 7" O.D., 17#, H-40, R-3, ST&C new casing set @ 125'. Cemented w/65 sx of Class "G" cement w/2% CaCl₂ & 1/4# Celloflake/sx. Plug down @ 7:30 AM 4-7-81. Good cement returns. NU & press tested BOPE to 500 psi--held ok.

Drilled 6-1/4" hole to 1,772' and ran logs.

Ran 44 jts 4-1/2" O.D., 10.5#, K-55, R-3, ST&C new casing set @ 1,769'. Cmt'd w/250 sx of 50-50 Pozmix w/2% Gel; 1/4# Celloflake and 0.5% NFR-1. Plug down @ 4:25 AM 4-10-81. Good cement returns.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Roscoe Gilligan TITLE Drlg Supt - RMD DATE 4-10-81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side

FARMINGTON DISTRICT

BY ELM