



STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

*Well No.*

OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

OIL CONSERVATION DIVISION  
BOX 2088  
SANTA FE, NEW MEXICO 87501

DATE 6-24-81

RE: Proposed MC   K    
Proposed DHC \_\_\_\_\_  
Proposed NSL \_\_\_\_\_  
Proposed SWD \_\_\_\_\_  
Proposed WFX \_\_\_\_\_  
Proposed PMX \_\_\_\_\_

Gentlemen:

I have examined the application dated 6-22-81  
for the Energy Resources Corp. GC.U # 328 N-33-2910-12W  
Operator Lease and Well No. Unit, S-T-R

and my recommendations are as follows:

Approve  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Yours truly,

Frank T. Lang

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO  
APPLICATION FOR MULTIPLE COMPLETION

Form C-107  
5-1-61

Operator Energy Reserves Group, Inc.		County San Juan	Date 5-18-81
Address P.O. Box 3280 - Casper, Wyoming 82602		Lease Gallegos Canyon Unit	Well No. 328
Location of Well	Unit N	Section 33	Township R29N
		Range T12W	

1. Has the New Mexico Oil Conservation Commission heretofore authorized the multiple completion of a well in these same pools or in the same zones within one mile of the subject well? YES \_\_\_\_\_ NO X
2. If answer is yes, identify one such instance: Order No. \_\_\_\_\_ ; Operator Lease, and Well No.: \_\_\_\_\_

3. The following facts are submitted:	Upper Zone	Intermediate Zone	Lower Zone
a. Name of Pool and Formation	Fruitland		Mesaverde
b. Top and Bottom of Pay Section (Perforations)	1,033'-1,052'		2,852'-3,797'
c. Type of production (Oil or Gas)	Gas		Disposal
d. Method of Production (Flowing or Artificial Lift)	Flowing		-----

4. The following are attached. (Please check YES or NO)

Yes	No	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Diagrammatic Sketch of the Multiple Completion, showing all casing strings, including diameters and setting depths, centralizers and/or turbolizers and location thereof, quantities used and top of cement, perforated intervals, tubing strings, including diameters and setting depth, location and type of packers and side door chokes, and such other information as may be pertinent.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	b. Plat showing the location of all wells on applicant's lease, all offset wells on offset leases, and the names and addresses of operators of all leases offsetting applicant's lease.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	c. Waivers consenting to such multiple completion from each offset operator, or in lieu thereof, evidence that said offset operators have been furnished copies of the application.*
<input checked="" type="checkbox"/>	<input type="checkbox"/>	d. Electrical log of the well or other acceptable log with tops and bottoms of producing zones and intervals of perforation indicated thereon. (If such log is not available at the time application is filed it shall be submitted as provided by Rule 112-A.)

5. List all offset operators to the lease on which this well is located together with their correct mailing address.

Amoco Production Company

501 Airport Road

Farmington, New Mexico 87401



6. Were all operators listed in Item 5 above notified and furnished a copy of this application? YES X NO \_\_\_\_ . If answer is yes, give date of such notification 5-20-81.

CERTIFICATE: I, the undersigned, state that I am the District Manager of the Energy Reserves Group, Inc. (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

*[Handwritten Signature]*  
Signature

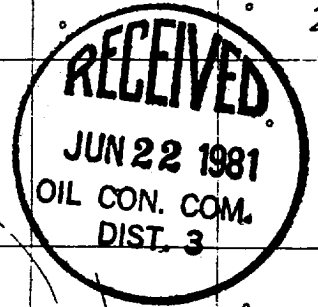
\*Should waivers from all offset operators not accompany an application for administrative approval, the New Mexico Oil Conservation Commission will hold the application for a period of twenty (20) days from date of receipt by the Commission's Santa Fe office. If, after said twenty-day period, no protest nor request for hearing is received by the Santa Fe office, the application will then be processed.

NOTE: If the proposed multiple completion will result in an unorthodox well location and/or a non-standard proration unit in one or more of the producing zones, then separate application for approval of the same should be filed simultaneously with this application.

GALLEGOS CANYON UNIT — PICTURED CLIFFS  
San Juan County, New Mexico

R 13 W

R 12 W



T 29 N

T 28 N

T 27 N

Note: Unnumbered wells are not Unit-Pictured Cliffs wells.

9 3/8" OD, 32.4# CSF set @ 277' KB.

Cm7id w/ 275 SX "B" w/ 2% CaCl<sub>2</sub> + 1/4# Fluocel/sx

Cm7 To surface.

Centralizers @ 144', 189', 257'

7" OD, 23# CSF set @ 4085' KB w/ DV Tool @ 1564'.

Cm7 1st Stage - 600 SX 50/50 Po<sub>2</sub> mix w/ 2% Gel +

1/4# Celluloflake/sx

2nd Stage - 400 SX of 50/50 Po<sub>2</sub> mix w/ 2% Gel +

1/4# Celluloflake/sx

Cemented top to bottom.

Centralizers - middle of shoe jty, 1st collar above, then every other collar for 5 more; 1 below DV Tool, 1 above DV Tool, then every other collar for 16 more.

2 3/8" Tubing Landed @ 1056'

Fruittans parts @ 1032-1062 (20 parts)

2 3/8" plastic lined tubing

Baker Retrieval "D" @ 2805'

Mesa Verde parts @ 2858' - 3754' (419 parts)



STATE OF NEW MEXICO  
**ENERGY AND MINERALS DEPARTMENT**

OIL CONSERVATION DIVISION  
 AZTEC DISTRICT OFFICE

BRUCE KING  
 GOVERNOR  
 LARRY KEHOE  
 SECRETARY

1000 RIO BRAZOS ROAD  
 AZTEC, NEW MEXICO 87410  
 (505) 334-6178

February 19, 1981

Energy Reserves Group, Inc.  
 P. O. Box 3280  
 Casper, Wyoming 82602

Energy Reserves Group, Inc.                      Gallegos Canyon Unit #328    N-33-29N-12W  
 OPERATOR                                              LEASE & WELL NUMBER                      LOCATION

Please submit information as indicated below for the above well.

- \_\_\_\_\_ C-102, Well Dedication Plat
- \_\_\_\_\_ C-103 (or Federal Form 9-331) - Notice of Intention To:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>

- \_\_\_\_\_ C-103 (or Federal Form 9-331) - Subsequent Report Of

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) _____			

- \_\_\_\_\_ C-105 (or Federal Form 9-330) - Well Record
- \_\_\_\_\_ Deviation Tabulation (notarized)
- \_\_\_\_\_ XXXX Administrative Order - MC DHC NSL NSP
- \_\_\_\_\_ Wire Line Logs (1 copy each)
- \_\_\_\_\_ XXXX Packer-Leakage Test Report
- \_\_\_\_\_ Other

Remarks:

\_\_\_\_\_  
 District #3