

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

SOLAR PETROLEUM, INC.

3. ADDRESS OF OPERATOR

ONE DENVER PL., #1300, 999 18th St., Denver, CO

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

AT SURFACE: 2630' FNL, 1360' 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	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>

(other) SPUD & CASING RECORD

SUBSEQUENT REPORT OF:

RECEIVED

JUN 30 1965

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

(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.)*

DATE SPURRED: 12-30-80
DATE TD REACHED: 1-11-81
DATE COMPLETED: 3-20-81
TD: 1,031'

SET 8-5/8" csg w/ 160 sx Class 'B', 1#/sx flake, 3% CaCl₂ (12-1" hole) @ 91'
w/ 5 bbls to sfc.

SET 4- $\frac{1}{2}$ " csg w/ 300 sx 50/50 P0Z, 2% gel, 10% salt, .5% Halad 4 (6- $\frac{1}{2}$ " hole)
@ 1,020' w/ 18 bbls to sfc.

Subsurface Safety Valve: Manu. and Type

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

SIGNED Allen F. Stone TITLE Sr. Pet. Engineer DATE June 26, 1981

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE _____

ACCEPTED FOR RECORD

NMOCC

9 1984

***See Instructions on Reverse Side**

FARMINGTON DISTRICT

BY