

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. 14-20-603-65
2. NAME OF OPERATOR Energy Reserves Group, Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR P. O. Box 3280 Casper, Wyoming 82602	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 330' FNL & 330' FEL	8. FARM OR LEASE NAME Navajo "U"
14. PERMIT NO.	9. WELL NO. 8
15. ELEVATIONS (Show whether DF, RT, GR, etc.) G.L. 5284'; KB-5292'	10. FIELD AND POOL, OR WILDCAT Horseshoe Gallup
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 8 T31N-R17W
	12. COUNTY OR PARISH San Juan
	13. STATE New Mexico

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FEB 19 1985  
BUREAU OF LAND MANAGEMENT  
NATION RESOURCE AREA

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

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

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) <input type="checkbox"/> Well History	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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 subject well was spudded at 5:00 P.M. 2-6-85. Drld 12 1/4" hole to 146'. Ran 3 jts new 8 5/8" 20# H-40 ST&C to 136'. Cmt'd w/95 sx Class "B" w/2% CaCl<sub>2</sub> and 1/4#/sx Flocele. Plug down @ 4:00 A.M. 2-7-85. Good circulation throughout. Circulated 3 bbls (14 sx) cmt to the surface. W.O.C. 12 hrs. NU BOPE. TIH and tag cmt @ 106'. Pressure tested BOP and casing to 600 psi-Held O.K. Drld 6 1/4" hole to 1200'. Circ and cond hole. TOOH. Ran GR-CDL-CNL and SP-IES logs. TIH and drld to 1230'. Circ hole. TOOH. LD DP. Ran 3l jts new 4 1/2" 9.5# K-55 ST&C to 1203'. Cmt'd w/180 sx 50-50 pozmix w/2% gel, 0.5% D-3l, and 1/4#/sx Celloflake. Plug down at 1:00 P.M. 2-9-85. Good circ throughout. Circ 7 bbls (3l sx) cmt to the surface. W.O.C.T.

NOTE: Please cancel verbal approval to D&A this well as received from Mr. Earl Beecher with the BLM in Farmington.

RECEIVED  
MAR 04 1985  
OIL & GAS DIV.  
DIST. 8

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

SIGNED Paul C. Bertoglio  
Paul C. Bertoglio

TITLE Petroleum Engineer

DATE 2-11-85

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

ACCEPTED FOR RECORD

FEB 21 1985

\*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA  
BY SJM