

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. NM-03153
2. NAME OF OPERATOR Energy Reserves Group, Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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 1740' FNL & 990' FWL	8. FARM OR LEASE NAME O. H. Randel
	9. WELL NO. 9
	10. FIELD AND POOL, OR WILDCAT Gallegos Gallup
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 15 T26N-R11W
14. PERMIT NO.	12. COUNTY OR PARISH San Juan
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR-5334'; KB 6347'	13. STATE New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(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 @ 6:00 P.M. 12-28-84. Drld 12 1/4" hole to 307'. Ran 7 jts 8 5/20# & 24# K-55 ST&C to 305'. Cmt'd to the surface w/200 sx (236 ft³) Class "B" w/2% CaCl₂. Circ. 10 bbls (48 sx) to the surface. Plug down @ 12:15 A.M. 12-29-84. W.O.C. 12 hrs. NU BOF Pressure tested csg and BOPE to 600 psi-Held O.K. Drld 7 7/8" to 5600'. Circ and cond hole. TOOH. RU loggers. Ran GR-FDC-CNL from 5600' to 4600' and SP-DIL from 5600' to 305'. RD loggers. TIH. TOOH laying down drill pipe. Ran 141 jts 4 1/2" 10.5# K-55 ST&C to 5596'. RU Dowell Cmt'd w/600 sx High Lift w/3% salt and 1/4#/sx Celloflake followed by 300 sx 50-50 pozmix w/2% gel, 10% salt, and 1/4#/sx Celloflake. Lost returns while switching to pozmix. Finished pumping cmt. Bumped plug @ 9:00 P.M. 1-6-85. Set slips. Release rig @ 12:00 Midnight 1-6-85.

Ran temperature survey 1-7-85. Found cmt top @ 2900'.

W.O.C.T.

BLM will be notified of plans as far as placing cement behind the pipe from 2900' to the surface after it is determined whether or not this well will be a commercial producer.

RECEIVED
FEB 11 1985

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

SIGNED Paul C. Bertoglio
Paul C. Bertoglio
(This space for Federal or State office use)

TITLE Petroleum Engineer

OIL CON. DIV.
DIST. 8 1-8-85

ACCEPTED FOR RECORD

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE
FEB 0 5 1985

FARMINGTON RESOURCE AREA

BY Sm

*See Instructions on Reverse Side

NMOCC