

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.)

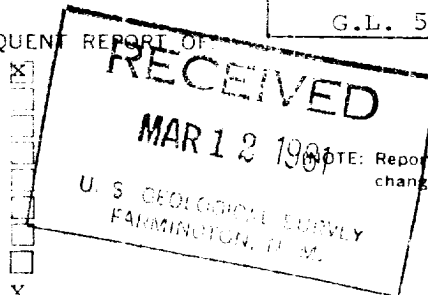
1. oil ☐ gas ☒ other ☐
well well
2. NAME OF OPERATOR
Energy Reserves Group, Inc.
3. ADDRESS OF OPERATOR
P.O. Box 3280 - Casper, Wyoming 82602
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790' FNL & 2,480' FEL (NW/NE)
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE 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
I-149 - Ind - 8474
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
NAV 8474 - Allotted
7. UNIT AGREEMENT NAME
Gallegos Canyon Unit
8. FARM OR LEASE NAME
9. WELL NO.
312
10. FIELD OR WILDCAT NAME
West Kutz Pictured Cliffs
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 16 T28N-R12W
12. COUNTY OR PARISH 13. STATE
San Juan New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
G.L. 5,427' - K.B. 5,429'

(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.)

The above referenced well was spudded @ 5:30 am 3-6-81.

Drld 9-7/8" hole to 127'. Ran 3 jts 7" O.D., 17#, H-40, R-3, ST&C new casing set @ 126'. Cmt'd w/60 sx Class "G" cmt w/2% CaCl₂ & 1/4# Celloflake/sx. Plug down @ 12:30 pm 3-6-81.

Nipped up & pressure tested BOPE to 500 psi--held o.k.

Drilled 6-1/4" hole to 1,420' and ran logs.

Ran 35 jts 4-1/2" O.D., 10.5#, K-55, R-3, ST&C new casing set @ 1,410'. Cmt'd w/160 sx of 50-50 Pozmix w/2% Gel & 1/4# Celloflake/sx & 0.5% CFR-2. Plug down @ 6:00 am 3-6-81. Good cement returns.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED [Signature] TITLE Drlg Supt-RMD DATE 3-10-81

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

MAR 13 1981

*See Instructions on Reverse Side

NMDC

FARMINGTON DISTRICT

BY [Signature]