

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
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: 1630 FSL & 1790 FEL (NW/SE)
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:

☐
☐
☐
☐
☐
☐
☐
☐
☒

RECEIVED

APR 10 1980

NOTE: Report results of multiple completion or zone change on Form 9-330.

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

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.)*

Drilled 7-7/8" hole to 6,320' and ran logs.

Ran 153 jts - 4-1/2" O.D., 10.5#, 8Rth, R-3, SS, ST&C, new casing set @ 6,316' w/stage tool @ 4,441'. Cemented 1st stage w/226 sx of 50-50 Pozmix w/2% Gel and 1/4# Flocele/sx. followed by 363 sx of Class "B" cement. w/10% Salt and 1/4# Flocele/sx. Opened stage collar w/2,500 psi and circulated for 6 hours.

Cemented 2nd stage w/924 sx of HOWCO Lite w/10# Gilsonite/sx. followed by 100 sx of 50-50 Pozmix w/2% Gel and 12-1/2# Gilsonite/sx. Plug down at 1:30 A.M. 4-5-80. Good returns.

4-7-80: W.O.C.T.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED Karen C. Billigan TITLE Drlg Supt.DATE April 8, 1980

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NMOCG

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

MAY 19 1980

FARMINGTON DISTRICT

BY [Signature]