

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF-079346

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Gallegos Canyon-P.C.

8. FARM OR LEASE NAME

9. WELL NO.

268

10. FIELD AND POOL, OR WILDCAT

Kutz Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 32-T28N-R12W

12. COUNTY OR PARISH 13. STATE

San Juan New Mexico

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Energy Reserves Group, Inc.

3. ADDRESS OF OPERATOR

P. O. Box 3280, Casper, WY 82602

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

430' FSL & 430' FEL (SE SE SE $\frac{1}{4}$)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

Ground - 5,679; K.B. - 5,688'

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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☐
☐
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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

well history

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(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.)*

Drilled 7-7/8" hole to 1,443'. Ran logs.
Ran 37 jts. - 1,445.80' (net), 4-1/2" O.D., 10.5#, 8rth, R-3,
used casing set at 1,442'. Cemented w/110 sx of Class "A" cement.
Plug down at 6:30 P.M., 1-4-77. Good returns.
W.O.C.T.



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

SIGNED

Karen C. Gilloger

TITLE

Operations Supt.- Drlg.

DATE

1-5-77

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: