

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPlicate
(For instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

LEASE DESIGNATION AND SERIAL NO.

NM - 14903

6. INDIAN, ALLOTTEE OR TRIBE NAME

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR PETRO-LEWIS FUNDS, INC.		8. FARM OR LEASE NAME CORBIN FEDERAL COMM	
3. ADDRESS OF OPERATOR P. O. BOX 2250, DENVER, COLO. 80201		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL & 1980' FWL of SEC. 20		10. FIELD AND POOL, OR WILDCAT SOUTH CORBIN-MORROW	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 20, T18S, R33E		12. COUNTY OR PARISH LEA	
13. STATE N.M.		14. PERMIT NO.	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3799.7 GR			

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 COMPLETE <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) RUN CASING & CEMENT <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.)*

6-7-77 - 3:30 A.M. DRLG TO TD @ 13600' CIRC 5 HRS.

6-7&8-77 -RU LOGGERS AND RAN: DIL,GR-CNL/FDC, 5100' to TD

6-11-77 -RU TO RUN DST. EST VOLUME LAST 20 MIN OF BLOW - 1.5 to 2.0 MCMF thru 1-3/4" OPENING @ STABLE 180 PSIG BACK PRESS. BHP CALCULATED @ 4841 PSI.

6-15-77 -RU TO RUN CASING. RAN 337 JTS. 5-1/2" CSG. 20.5#, N-80,LTC, R3, GR. TD W/2.00' SHOE & 1.76 FLOAT COLLAR. 13448.66

6-16-77 -2:00 A.M. CEMENTING W/700SXS CLASS "H" CMT MIXED W/ 4/100# HALLAD-22, 263 # PLUS 5# KCL- 35SXS MIXED W/700 SXS CMT. BUMPED PLUG @ 3:45 P.M. RELEASED PRESS @ 4:05 P.M. W.O.C.

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

SIGNED

TITLE SUPT./LEVELLAND DIST. DATE 6/29/77

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD