

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
Petro-Lewis Corp.
3. ADDRESS OF OPERATOR
P.O. Box 509 - Levelland, Texas 79336
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FSL & 1980' FWL of Sec. 20
AT TOP PROD. INTERVAL: 13,200'
AT TOTAL DEPTH: 13,431'
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) <u>Cement intermediate</u>	

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.)*

4-27-77 - Drilling to 5100', TD for intermediate.
Ran volume meter, annular volume 3764 f³
RIH 2.00 float shoe, 33.60 shoe joint 2072.27' 8-5/8" K-55, 32# csg.
4.10 DV tool - 2999.23 8-5/8" K-55, 32# ST-C, R-3 csg. new
5111.30' K.B., 115 joints 8-5/8" circulated 3 hrs.

4-28-77 - RU to cmt.
1st Stage - Pumped 250 sx. Class "C" and 200 sx. HL, pumped plug and displaced w/126 water and 182 mud, bumped plug and opened DV tool, WOC 4 hrs.
2nd Stage - Pumped 100 sx. Class "C" and 2250 sx. HL, pumped plug and displaced w/182 water, bumped plug. Circulated 533 sx. cmt. WOC.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED Ken Sauphy TITLE Sr. Drlg. Foreman DATE 1-12-78

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY

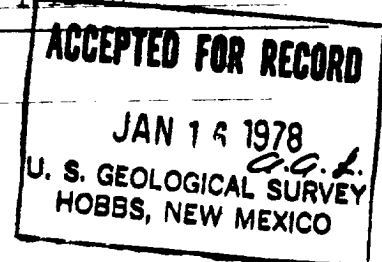
TITLE _____

DATE _____

*See Instructions on Reverse Side

5. LEASE
NM-14903
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Corbin Federal Com.
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
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. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3799.7 GR

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



USCOLE SEP 27 1964

10-17-64
10-17-64
10-17-64