

200016

TESTED 1500 PSI

TO: DAVE SHELTON



**State of Colorado  
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-

VERBAL OK TO

INJECT

TEST Q2, Q3, 2001

4/13/01

JH

**INJECTION WELL PERMIT APPLICATION**

Submit a completed Form 33 with or after approval obtained on Form 31 (Underground Permit Application) or you must have a previously approved Injection Well Permit.

1. Operator may not commence injection into this well until this form is approved.
2. Each individual injection well must be approved by this form.

Well Name and Number: South Clarks Lake Muddy API No: 05-069062  
 UIC Facility No: Sand Unit #22-75 (as assigned on an approved Form 31)  
 Project Name: \_\_\_\_\_ Operator Name: Clarks Lake Operating Co.  
 Field Name and Number: Clarks Lake County: Larimer  
 Qtr: NESE Sec: 22 Twp: 9N Range: 68W Meridian: 6th

Current Wellbore Diagram \_\_\_\_\_  
 Proposed Wellbore Diagram \_\_\_\_\_

**CURRENT WELLBORE INFORMATION**

	SIZE	DEPTH	NO. SACKS	CEMENT TOP	Cement Top Determined By:		
					CBL	CIRCULATED	CALCULATED
Surface Casing	8-5/8	608	340	Surface	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intermediate Casing (if any)					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Production Casing	5-1/2	6343	518	4190	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stage Collar	5-1/2	2242	464	866			

Plug Back Total Depth: 6281 Tubing Depth: 6031 Packer Depth: 6037

Muddy J Formation Gross Perforation Interval: 6107 to 6156  
 \_\_\_\_\_ Formation Gross Perforation Interval: \_\_\_\_\_ to \_\_\_\_\_  
 \_\_\_\_\_ Formation Open Hole Interval (if any): \_\_\_\_\_ to \_\_\_\_\_

List below all Plugs, Bridge Plugs, Stage Cementing or Squeeze Work performed on this wellbore: (if more space needed, continue on reverse side of this form.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Describe below any changes to the wellbore which will be made upon conversion. (This includes but not limited to changes of tubing and packer setting depths, any additional squeeze work for aquifer protection or casing leaks, setting of bridge plugs to isolate non-injection formations.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Comments: Propose to convert this well from producer status to injector status.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: \_\_\_\_\_

Signed: Thomas E. Fenwick Title: Co-owner Date: 3-30-01

OGCC Approved: JH Title: PE Date: 4/30/2001

MAX. SURFACE INJECTION PRESSURE: 2750 PSI If Disposal Well, MAX. INJECTION VOL. LIMIT: \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

COGCC TO WITNESS MIT Q2 OR Q3 2001

MIT WITNESSED 7/17/01 ~ PASSED