

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

D-028942A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

COLO. OIL & GAS CONS. COMM.

7. UNIT AGREEMENT NAME

McCallum Unit

8. FARM OR LEASE NAME

9. WELL NO.

115

10. FIELD AND POOL, OR WILDCAT

McCallum/Pierre "B"

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

Section 12, T9N, R79W

12. COUNTY OR PARISH 13. STATE

Jackson

CO

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. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Conoco Inc.

3. ADDRESS OF OPERATOR

907 North Poplar Street, Casper, WY 82601

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

2,190' FNL, 2,300' FWL (SE/NW)

14. PERMIT NO.

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

8,246' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETION ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

Spud date ☒

(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 perti-
nent to this work.)*

The subject well was spudded on September 14, 1985. 8 5/8" surface casing is set
at 150' and cemented with 120 sacks Class "G" cement.

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

SIGNED J. C. Thompson

TITLE Administrative Supervisor

DATE October 16, 1985

(This space for Federal or State office use)

APPROVED BY William Smith

CONDITIONS OF APPROVAL, IF ANY:

TITLE DIRECTOR

O & G Cons. Comm.

DATE OCT 24 1985

BLM Craig (3)

COGCC (2)

AFF File 3780 (SCE)

*See



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