



00418452

OGCC FORM 4
Rev. 1/78

STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

FOR OFFICE USE			
ET	FE	UC	SE

File in duplicate for Patented and Federal lands.
File in triplicate for State lands.

6. LEASE DESIGNATION & SERIAL NO.
C-1633

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.)

8. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL GAS WELL OTHER

7. UNIT AGREEMENT NAME
Cathedral

2. NAME OF OPERATOR
James L. Ludwick

8. FARM OR LEASE NAME
Federal

3. ADDRESS OF OPERATOR
P.O. Box, Farmington, New Mexico 87499

9. WELL NO.
P-23-3-101-S

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface 1,227' FSL, 4,498' FWL, Sec. T3S, R101W, 6th P.M.
At proposed prod. zone

10. FIELD AND POOL, OR WILDCAT
Cathedral

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 23, T3S, R101W 6th P.M.

14. PERMIT NO. 79 400

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6,983' KB

12. COUNTY Rio Flanco

13. STATE Co.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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) <u>Status Report</u>	

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) <u>Operator Change</u>	

(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.)

18. Date of work _____ * Must be accompanied by a cement verification report.

THIS WELL WAS PURCHASED FROM MASTER PETROLEUM & DEVELOPMENT CO., INC.
EFFECTIVE 8-25-88.

*Status Report As of 1-1-90
Well shut in Pipe Line Leaked.
No Gas Sales*

RECEIVED

FEB 2 1990

COLO. OIL & GAS CONS. COMM.

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

PRINT JAMES L. LUDWICK

SIGNED James L. Ludwick TITLE Owner DATE 10-11-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

STATUS REPORT REQUIRED
EVERY 6 MONTHS ON SHUT-IN
OR TEMPORARILY ABANDONED WELLS