



IND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADO

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JUL 15 1970

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AUG 27 1970

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

COLO. OIL & GAS CONS. COMM. SOLO OIL & GAS CONS. COMM.
Patented

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 Water Inj Well

2. NAME OF OPERATOR
Shell Oil Company (Rocky Mountain Division Production)

3. ADDRESS OF OPERATOR
1700 Broadway, Denver, Colorado 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface 1980' FSL and 660' FWL ~~Sec 3~~ Lot 4
At proposed prod. zone

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4145 KB

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Divide Unit

8. FARM OR LEASE NAME
(Formerly Perkins Bros
Unit Haas "B" 2 & Unit #3)

9. WELL NO.
18-WI

10. FIELD AND POOL, OR WILDCAT
Divide

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
~~NW SW~~ Section 3-
T 8N-R 53W

12. COUNTY OR PARISH
Logan

13. STATE
Colorado

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"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/> Temporary abandonment 3-1-70	X

(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.)

Well shut in by valve on casing at surface with no tubing in hole. Well is temporarily abandoned to retain for possible utilization.

DVR	<input checked="" type="checkbox"/>
FIP	<input checked="" type="checkbox"/>
HIM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>

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

SIGNED *D.C. Hall* TITLE Division Petroleum Engr. DATE July 8, 1970

(This space for Federal or State office use)

APPROVED BY *W. J. Rogan* TITLE DIRECTOR DATE SEP 1 1970
O & G CONS. COMM.

CONDITIONS OF APPROVAL, IF ANY: