



99999999 - patented and Federal lands.
File in triplicate for State lands.

ON COMMISSION
OLORADO

RECEIVED

JUL 20 1967

COLO. OIL & GAS CONSV. COMM.

63/3

5. LEASE DESIGNATION AND SERIAL NO.

State-Brown #1

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR E. Lyle Johnson PHONE SW 4-5655

8. FARM OR LEASE NAME Same

3. ADDRESS OF OPERATOR 626 N. Broadway, Moore, Oklahoma

9. WELL NO. 1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface C W/2 NE
At proposed prod. zone

10. FIELD AND POOL, OR WILDCAT Chappell

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

36, 12N, 44W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3580 K. B.

12. COUNTY OR PARISH Sedgwick

13. STATE Colorado

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT

(Other)

(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.)

Propose to plug off present depleted D. Sand perforated at 3220-25, pull 4 1/2" casing and abandon, starting operations shortly after August 1st, 1967

DVR	
FJP	<input checked="" type="checkbox"/>
HHM	
JAM	
JJB	<input checked="" type="checkbox"/>

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

SIGNED E. Lyle Johnson TITLE

DATE July 18, 1967

(This space for Federal or State office use)

APPROVED BY W. Rogers TITLE Director

DATE JUL 21 1967

CONDITIONS OF APPROVAL, IF ANY:

DS-115-05058



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