

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



Use for Patented and Federal Lands. -- 6 1987
Use for State lands.

FOR OFFICE USE			
RT	FE	UC	SE
			MP

SUNDRY NOTICES AND REPORTS ON WELLS IN COMM.

(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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR Petroleum, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Box 340; Kimball, NE 69145		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface C SE-SE Sec. 22-12N-56W At proposed prod. zone		8. FARM OR LEASE NAME Buczowskyj 59185	
14. PERMIT NO.		9. WELL NO. #5	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4,909 GR		10. FIELD AND POOL, OR WILDCAT Sleeper Field	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
		12. COUNTY Weld	13. STATE Colo.

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 checked="" 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 checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS: <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(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 June 1987 * Must be accompanied by a cement verification report.

Pull Pipe--Plug & Abandon Well

Sand across perfs
 10 Sks above perfs
 20 Sks bottom of surface
 10 Sks top of surface
 Weld plate on top
 Clean & Level Location

EXHAUSTED
OIL WELL

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

PRINT Royal Franklin
 SIGNED Royal Franklin TITLE Lease Foreman DATE July 1, 1987

(This space for Federal or State office use)

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



WELL SITE INSPECTION FORM

LOCATION SE SE 22-12N-56W
OPERATOR Petroleum Inc.
WELL NAME Buczowskyj #5

FIELD ~~Wattenberg~~ Sleeper
COUNTY Weld
PERMIT # _____

DATE OF INSPECTION DURING DRILLING: _____

RIG _____ SURFACE CASING: _____ DEPTH: _____
BOP'S _____ RETURNS: _____ WOC: _____
CONTACT _____ CMT VOL: _____
ADEQUATE AQUIFER PROTECTION? _____
COMMENTS _____

DATE OF INSPECTION AFTER COMPLETION: _____

FRACED: YES ___ NO ___ PRODUCTION STRING: _____
WATER DISPOSAL: PITS ___, INJECTED ___, COMMERCIAL ___, UNKNOWN ___, N.A. ___
PITS: PERMIT Y ___ N ___, SKIM TANK Y ___ N ___, DIMENSIONS _____ GALLONS
LEASE SIGN: YES ___ NO ___ TANK ID: YES ___ NO ___ NA ___ FENCED: YES ___ NO ___
SURFACE EQUIPMENT: _____
COMMENTS: _____

DATE OF P&A INSPECTION 8/13/87

PITS BACKFILLED: YES NO ___ SURFACE RECLAIMED: YES NO ___
HOLE MARKER: YES ___ NO SITE CLEAN: YES NO ___
BOND RELEASE OK: YES NO ___ LANDOWNER RELEASE: YES ___ NO ___

COMMENTS: Final P&A inspection OK
< Old pits used by Buczowski # 2 well >

DATE OF SAFETY INSPECTION _____

COMMENTS: _____

INSPECTOR SP

API No. 05-123-7141

P&A Inspected: Yes No ___