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**GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADO**

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

RECEIVED
FEB 10 1966

LEASE DESIGNATION AND SERIAL NO.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different use. Use "APPLICATION FOR PERMIT—" for such proposals.)

**OIL & GAS
CONSERVATION
COMMISSION**

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER - DRY HOLE		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR STUARCO OIL COMPANY, INC.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 2117 First National Bank Building, Denver, Colorado 80202		8. FARM OR LEASE NAME STATE	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 60' S & 100' E of C NW $\frac{1}{4}$ SE $\frac{1}{4}$ Sec. 3-T10N-R53W (1920' FSL and 1880' FEL) At proposed prod. zone		9. WELL NO. "B" No. 1	
14. PERMIT NO. 66 20 ✓		10. FIELD AND POOL, OR WILDCAT Wildcat	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4315' GL 4320' KB		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 3-T10N-R53W, 6th P.M.	
		12. COUNTY OR PARISH Logan	13. STATE Colorado

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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	
(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.)

✓ Plugged and abandoned January 20, 1966. Total Depth: 5175' Dr1r., 5181' EL
Displaced 15 sacks of cement at 120'.
Displaced 10 sacks of cement at 30'.

*Location checked on 12/13/66.
Per A O.K., Jim*

DVR	
WRS	
HHM	
JAM	✓
FJP	✓
JJD	✓
FILE	

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

SIGNED _____ TITLE District Manager DATE 2/9/66

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE Robert Chandler DATE FEB 15 1966
CONDITIONS OF APPROVAL, IF ANY: Director



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