

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



00272208

RECEIVED

AUG 21 1978

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

SUNDRY NOTICES AND REPORTS ON WELLS GAS CONS. COM.

(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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Supply Well | | 5. LEASE DESIGNATION AND SERIAL NO. C-72420005 |
| 2. NAME OF OPERATOR Continental Oil Company | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 152 North Durbin Stree, Casper, Wyoming 82601 | | 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 2210' FNL, 220' FWL (SW NW) At proposed prod. zone | | 8. FARM OR LEASE NAME Conoco-State 16 |
| 14. PERMIT NO. 74-408 | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 8195' GR | 9. WELL NO. 4 |
| | | 10. FIELD AND POOL, OR WILDCAT Pierre "B" |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 16, T9N, R78W |
| | | 12. COUNTY Jackson |
| | | 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) <u>Convert to WSW</u> <input checked="" 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.)

Date of work In Progress

At this time the subject well is being converted to a water supply well to initiate a pilot waterflood in the South McCallum Field.

| | |
|-----|-------------------------------------|
| DVR | <input checked="" type="checkbox"/> |
| FJP | <input checked="" type="checkbox"/> |
| HHM | <input checked="" type="checkbox"/> |
| JAM | <input checked="" type="checkbox"/> |
| JJD | <input checked="" type="checkbox"/> |
| RLS | <input type="checkbox"/> |
| CGM | <input type="checkbox"/> |

*Converted to water
Card in compl. file*

COGCC(3) FILE

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

SIGNED J.C. Thompson TITLE Administrative Supervisor DATE August 16, 1978

(This space for Federal or State office use)

APPROVED BY W.L. Rogers TITLE DIRECTOR DATE AUG 24 1978
G & G CONS. COMM.

CONDITIONS OF APPROVAL, IF ANY:

X