

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

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

RECEIVED

AUG 28 1986



COLO. OIL & GAS CONS. COMM. 2000-S State

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

2. NAME OF OPERATOR  
Conoco Inc.

3. ADDRESS OF OPERATOR  
907 N. Poplar Casper, Wyoming 82601

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface 2,210' FNL, 220' FWL (SW/NW)  
At proposed prod. zone

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
8,195' GR



5. LEASE DESIGNATION AND SERIAL NO.  
2000-S State

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Conoco State 16

9. WELL NO.  
4

10. FIELD AND POOL, OR WILDCAT  
So. McCallum/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 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.)

\* Date of work 7-30-86

The subject well was plugged and abandoned as follows: 7-30-86

- Pulled rods and pump. Ran 2 7/8" tubing to 584' GL. Pumped 11.2 bbls mud, 4.8 bbls water, 90 sacks Class "G" cement. Displaced with 1/2 bbls water and 1.2 bbls mud.
- Tagged top of cement with wireline in 8 5/8" casing @ 261' GL. Filled casing with mud. Ran 1" pipe to 100' GL. Pumped 35 sacks Class "G" cement, returns to surface.

Set dry hole marker. Surface restoration will be completed by October 1, 1986.

WRS	
WFP	
WHR	
JAN	
MCC	
LAR	
COM	
ED	

COGCC(3) BLM-Craig(2) File 4024 (SJM)

18. I hereby certify that the foregoing is true and correct  
SIGNED OC Thompson TITLE Administrative Supervisor DATE Aug. 25, 1986

(This space for Federal or State office use)  
APPROVED BY William R. Smith TITLE DIRECTOR DATE SEP 12 1986  
CONDITIONS OF APPROVAL, IF ANY: O & G Cons. Comm.

\* Please submit date of plugging

AR