

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

RECEIVED



00051847

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

JUN 27 1986

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR Vessels Oil & Gas Company		6. INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 600 S. Cherry Street, Suite 1220 Denver, CO 80222		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 990' FNL & 1380' FEL (NENE) At proposed prod. zone		8. FARM OR LEASE NAME Vicklund "G" Unit	
14. PERMIT NO. <u>84-1061</u> No # shown on permit		9. WELL NO. #1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5044' GR		10. FIELD AND POOL, OR WILDCAT Wattenberg	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 2-T1N-R69W	
		12. COUNTY Boulder	13. STATE CO

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) <input type="checkbox"/>	Status Report <input checked="" type="checkbox"/>

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

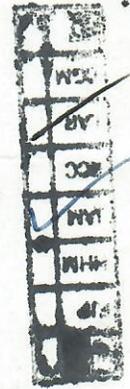
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

18. Date of work _____ * Must be accompanied by a cement verification report.

Status: Waiting on completion as of 9/8/84

*** Please provide a permit # to us. There is not one on our permit to drill.

Oper. No.: 93200
Field Code: 90750
Formation Code: JSND
Drir. Code: 28300



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

SIGNED *Nanette Cox* TITLE Production Secretary DATE 6/26/86

(This space for Federal or State office use)

APPROVED BY *J. J. [Signature]* TITLE SUPR. PETROLEUM ENGINEER DATE JUN 30 1986

CONDITIONS OF APPROVAL, IF ANY:

W