

STATE OF COLORADO
ND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES



00622849

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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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. FEDERAL/INDIAN OR STATE LEASE NO.
2. NAME OF OPERATOR CIG Resources Company		6. PERMIT NO.
3. ADDRESS OF OPERATOR P.O. Box 1087 CITY STATE ZIP CODE Colorado Springs, Colorado 80944		7. API NO. 05-017- 06329
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NW SW Sec. 29, T12S, R44W At proposed prod. zone		8. WELL NAME Champlin 360 Amoco A
12. COUNTY CHEYENNE		9. WELL NUMBER 1
		10. FIELD OR WILDCAT ARCHER (Unitized Morrow)
		11. QTR. QTR. SEC., T.R. AND MERIDIAN NW SW Sec. 29, T12S, R44W

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

13A. NOTICE OF INTENTION TO: <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> COMMINGLE ZONES <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> REPAIR WELL <input checked="" type="checkbox"/> OTHER <u>Recomplete into Unitized Archer Morrow</u>	13B. SUBSEQUENT REPORT OF: <input type="checkbox"/> FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG) <input type="checkbox"/> ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS) <input type="checkbox"/> REPAIRED WELL <input type="checkbox"/> OTHER <small>*Use Form 5 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingled Completions and Recompletions</small>	13C. NOTIFICATION OF: <input type="checkbox"/> SHUT-IN; TEMPORARILY ABANDONED (DATE _____) (REQUIRED EVERY 6 MONTHS) <input type="checkbox"/> PRODUCTION RESUMED (DATE _____) <input type="checkbox"/> LOCATION CHANGE (SUBMIT NEW PLAT) <input type="checkbox"/> WELL NAME CHANGE <input type="checkbox"/> OTHER _____
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14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (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)

15. DATE OF WORK February 19, 1996

→ Dump 2 ex onto on CIBP
 Run 4-1/2" casing to 5555' GL (leaving 20 feet from base of 4 1/2" casing and CIBP @ 5575' GL). Run a 15' shoe joint w/float shoe and float collar. Cement 4-1/2" and 7" casing annulus with 450 sacks of cement. Rotate 4-1/2" casing while pumping cement. WOC 8 hours. Pressure test 4-1/2" casing to 300 psig. Run Gamma-Neutron CCL Logs from PBDT to 5225' GL. Swab casing dry. Trip in with tubing and recomplete into the Morrow, perforating 5360' - 5382' GL with tubing conveyed perforating using 4spf. SI and wait for pipeline connection. Sundry notice filed for 30'X10'X5' workover pit.

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

SIGNED Larry D. Kennedy, Jr. TELEPHONE NO. (719) 520-4287
 NAME (PRINT) LARRY D. KENNEDY, JR. TITLE STAFF ENGINEER DATE 2/13/96

(This space for Federal or State office use)

APPROVED Julio M. [Signature] TITLE PERT DATE 3-4-96
 CONDITIONS OF APPROVAL, IF ANY: