

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



RECEIVED
SEP 6 1985

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

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"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION SERIAL NO. Fee - L & L Land Company	
2. NAME OF OPERATOR Coastal Oil & Gas Corporation		6. INDIAN, ALLOTTEE OR TRIBE NAME NA	
3. ADDRESS OF OPERATOR P. O. Box 749, Denver, Colorado 80201		7. UNIT AGREEMENT NAME NA	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FEL, 1980' FSL NE SE At proposed prod. zone Same		8. FARM OR LEASE NAME L & L Land Company #1-24	
14. PERMIT NO. 85-1054		9. WELL NO. 1-24	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5069' GR ungrd		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 24-T3S-R61W	
		12. COUNTY Adams	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, (Other) <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Spud & running surface casing <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 August 18 & 19, 1985

* Must be accompanied by a cement verification report.

Spud 12 1/4" hole at 5 PM August 18, 1985.

August 19, 1985 Ran 8 5/8" casing, 19 joints, 773', 24#, K-55, ST&C set at 784', float collar at 744'.

Cement with HOWCO with 220 sacks lite, 2% CaCl₂, 1/4#/sack Flocele, plus 130 sacks Class "G", 2% CaCl₂, 1/4#/sack Flocele. Circulate 25 barrels cement to surface. Plug down 11:45 AM August 19, 1985. Pressure test BOP to 1000 psi, ok. Tag cement at 738'.

19. I hereby certify that the foregoing is true and correct
SIGNED H. E. Aab TITLE District Drilling Manager DATE September 3, 1985
Denver District

(This space for Federal or State office use)

APPROVED BY William Smith TITLE DIRECTOR DATE SEP 1 8 1985
Cons. Comm.

Jim

✓

HALLIBURTON SERVICES JOB SUMMARY

FORM 3025

HALLIBURTON
DIVISION
HALLIBURTON
LOCATION

Denver
Brighton

BILLED ON
TICKET NO.

287 985-3

RECEIVED

SEP 6 1985

61985
 OIL & GAS
 L & L Land
 1-24
 JOB TYPE
 GAS SURF. CAS.

WELL DATA

FIELD Senorita Prospect SEC. 24 TWP. 35 RNG. 61W COUNTY Adams STATE Co.

FORMATION NAME	TYPE	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING		N	24	8-5/8	0	787	1000
LINER							
TUBING							
OPEN HOLE				12-1/4	0	790	SHOTS/FT.
PERFORATIONS							
PERFORATIONS							
PERFORATIONS							

FORMATION THICKNESS FROM TO

INITIAL PROD: OIL _____ SPD. WATER _____ SPD. GAS _____ MCFD _____

PRESENT PROD: OIL _____ SPD. WATER _____ SPD. GAS _____ MCFD _____

COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____

PACKER TYPE _____ SET AT _____

BOTTOM HOLE TEMP. _____ PRESSURE _____

MISC. DATA _____ TOTAL DEPTH _____

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT <u>Ins. w/F.V.</u> <u>8 5/8</u>	<u>1</u>	<u>Howco</u>
GUIDE SHOE <u>T 1 1/2 x 4 1/2</u>	<u>1</u>	<u>Howco</u>
CENTRALIZERS <u>15-3</u>	<u>9</u>	<u>Howco</u>
BOTTOM PLUG		
TOP PLUG <u>5W</u>	<u>1</u>	<u>Howco</u>
HEAD <u>8 5/8 P.C. & Man.</u>	<u>1</u>	<u>Howco</u>
TRIMMER <u>E-ZLOK</u>	<u>2</u>	<u>Howco</u>
OTHER <u>Howco Weld A</u>	<u>2 #</u>	<u>Howco</u>

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB/GAL-AP

DISPL. FLUID _____ DENSITY _____ LB/GAL-AP

PROP. TYPE _____ SIZE _____ LB.

PROP. TYPE _____ SIZE _____ LB.

ACID TYPE _____ GAL.

ACID TYPE _____ GAL.

ACID TYPE _____ GAL.

SURFACTANT TYPE _____ GAL.

HE AGENT TYPE _____ GAL.

FLUID LOSS ADD. TYPE _____ GAL.-LB.

GELLING AGENT TYPE _____ GAL.-LB.

FRIC. RED. AGENT TYPE _____ GAL.-LB.

BREAKER TYPE _____ GAL.-LB.

BLOCKING AGENT TYPE _____ GAL.-LB.

PERFPAC BALLS TYPE _____ QTY.

OTHER _____

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>8-18-85</u>	DATE <u>8-19-85</u>	DATE <u>8-19-85</u>	DATE <u>8-19-85</u>
TIME <u>2:00</u>	TIME <u>07:00</u>	TIME <u>11:15</u>	TIME <u>11:20</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>D. Knipke</u>	<u>2515</u>	<u>Brighton</u>
<u>R. Torrez</u>	<u>3130-</u>	<u>Brighton</u>
<u>S. Perez</u>	<u>5743</u>	

DEPARTMENT Cmt.

DESCRIPTION OF JOB 8 5/8 SURF. CAS.

JOB DONE THRU: TUBING CASING ANNULUS TDS./ANN.

CUSTOMER REPRESENTATIVE [Signature]

HALLIBURTON OPERATOR D. Knipke COPIES REQUESTED 1

CEMENT DATA

STAGE	NUMBER OF SACKS	TYPE	API CLASS	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
<u>1A</u>	<u>220</u>	<u>H L C</u>	<u>C</u>	<u>B</u>	<u>2% C.C., 1/4# Floccid/BR</u>		<u>1.84</u>	<u>12.7</u>
<u>1B</u>	<u>130</u>	<u>Reg.</u>	<u>G</u>	<u>Dacotah B</u>	<u>2% C.C., 1/4# Floccid/BR</u>		<u>1.15</u>	<u>15.8</u>

PRESSURES IN PSI

CIRCULATING _____ DISPLACEMENT _____

BREAKDOWN _____ MAXIMUM _____

AVERAGE _____ FRACTURE GRADIENT _____

SHUT-IN: INSTANT _____ 5-MIN. _____ 15-MIN. _____

ORDERED _____ AVAILABLE _____ USED _____

AVERAGE RATES IN BPM

TREATING 8 DISPL. 6 OVERALL 7

CEMENT LEFT IN PIPE

POST 40 REASON Ins. F.H. valve

SUMMARY

FRESHEN: DBL-10 TYPE H2O

LOAD & SKDN: DBL-GAL. _____ PAD: DBL-GAL. _____

TREATMENT: DBL-GAL. _____ 1A: 72 DISPL: DBL-47.5

CEMENT SLURRY: DBL-18:27

TOTAL VOLUME: DBL-GAL. _____

REMARKS

Cmt. w/ 1A - 12.7 yd.

1B - 15.8 yd. by sack

Good Returns

CUSTOMER

DISTRICT Southern

DATE 8-19-85

TO: HALLIBURTON SERVICES YOU ARE HEREBY REQUESTED TO FURNISH EQUIPMENT AND SERVICEMEN TO DELIVER AND OPERATE

THE SAME AS AN INDEPENDENT CONTRACTOR TO: Coastal Oil & Gas (CUSTOMER) AND DELIVER AND SELL PRODUCTS, SUPPLIES, AND MATERIALS FOR THE PURPOSE OF SERVICING

WELL NO. 1-24 LEASE L & L Land SEC. 24 TWP. 35 RANGE 61W

FIELD Seneca Prospect COUNTY Adams STATE Co. OWNED BY Coastal Oil & Gas

THE FOLLOWING INFORMATION WAS FURNISHED BY THE CUSTOMER OR HIS AGENT

FORMATION NAME _____ TYPE _____
FORMATION THICKNESS _____ FROM _____ TO _____
PACKER: TYPE _____ SET AT _____
TOTAL DEPTH _____ MUD WEIGHT _____
BORE HOLE _____
INITIAL PROD: OIL _____ BPD, H2O _____ BPD, GAS _____ MCF
PRESENT PROD: OIL _____ BPD, H2O _____ BPD, GAS _____ MCF

Table with columns: NEW USED, WEIGHT, SIZE, FROM, TO, MAX. ALLOW. P.S.I. Rows include CASING, LINER, TUBING, OPEN HOLE, PERFORATIONS.

PREVIOUS TREATMENT: DATE _____ TYPE _____ MATERIALS _____

TREATMENT INSTRUCTIONS: TREAT THRU TUBING [] ANNULUS [] CASING [] TUBING/ANNULUS [X] HYDRAULIC HORSEPOWER ORDERED _____

Handwritten notes: C.T. 8 1/2 surf. CAS. w/L.C. = 220 SK HLC w/2 1/2 C.C. 1/4 # Flscale/sk T.I. - 130 SK 'G' w/2 1/2 C.C. 1/4 # Flscale/sk

CUSTOMER OR HIS AGENT WARRANTS THE WELL IS IN PROPER CONDITION TO RECEIVE THE PRODUCTS, SUPPLIES, MATERIALS, AND SERVICES

THIS CONTRACT MUST BE SIGNED BEFORE WORK IS COMMENCED

As consideration, the above-named Customer agrees:

- (a) To pay Halliburton in accord with the rates and terms stated in Halliburton's current price lists.
(b) Halliburton shall not be responsible for and Customer shall secure Halliburton against any liability for damage to property of Customer and of the well owner...
(c) Customer shall be responsible for and secure Halliburton against any liability for reservoir loss or damage...
(d) Customer shall be responsible for and secure Halliburton against any and all liability of whatsoever nature for damages as a result of subsurface trespass...
(e) Customer shall be responsible for and secure Halliburton against any liability for injury to or death of persons...
(f) Halliburton makes no guarantee of the effectiveness of the products, supplies or materials...
(g) Customer shall, at its risk and expense, attempt to recover any Halliburton equipment, tools or instruments which are lost in the well...
(h) Because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others...
(i) Halliburton warrants only title to the products, supplies and materials and that the same are free from defects in workmanship and materials...
(j) Invoices payable NET by the 20th of the following month after date of invoice...
(k) This contract shall be governed by the law of the state where services are performed...
(l) Halliburton shall not be bound by any changes or modifications in this contract...

I HAVE READ AND UNDERSTAND THIS CONTRACT AND REPRESENT THAT I AM AUTHORIZED TO SIGN THE SAME AS CUSTOMER'S AGENT.

SIGNED [Signature] CUSTOMER
DATE 8-19-85

We certify that the Fair Labor Standards Act of 1938, as amended, has been complied with in the production of goods and/or with respect to services furnished under this contract.

TIME 0030 A.M.

CUSTOMER

