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OGC FORM 4



00326257

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.

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FEB 17 1975

COLO. OIL & GAS CONSERVATION COMMISSION

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 type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry Hole | | 5. LEASE DESIGNATION AND SERIAL NO. | |
| 2. NAME OF OPERATOR TOM JORDAN | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME COMM. | |
| 3. ADDRESS OF OPERATOR Suite 304, 1700 Broadway, Denver, Colorado 80202 | | 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 SE SE Sec. 6, T3S-R60W - 660 FSL & 660 FEL At proposed prod. zone Same | | 8. FARM OR LEASE NAME Flader Industries, Inc. | |
| 14. PERMIT NO. 75 29 | | 9. WELL NO. 2 | |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4977 GR - 4986 KB | | 10. FIELD AND POOL, OR WILDCAT Wildcat | |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 6, T3S-R60W | |
| | | 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 checked="" 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"/> | |

(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 2-9-75

Plug and abandon per telephone instructions of Mr. Frank Piro

6540 - 6500, 15 sacks (across J sand)
400 - 180, 75 sacks (across Fox Hills)
Top of Surface Casing - 10 sacks

| | | | |
|-----|---|-----|---|
| DVR | | DVR | |
| FJP | | FJP | ✓ |
| HMM | ✓ | HMM | ✓ |
| JAM | ✓ | JAM | ✓ |
| JJD | ✓ | JJD | ✓ |
| QCH | | QCH | |
| CGM | | CGM | ✓ |

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

SIGNED J. J. Mosser TITLE Geologist DATE 2/10/75

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE FEB 19 1975

CONDITIONS OF APPROVAL, IF ANY: