

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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RECEIVED

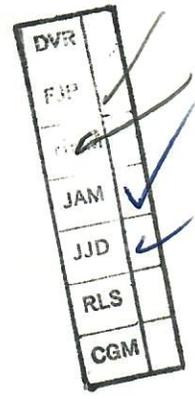
80

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"/> <u>Plugged & Abandoned</u>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR <u>Colton & Colton</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <u>1022 Midland Savings Building Denver, Colorado 80202</u>		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 <u>NW/SE Section 21; T 3 S; R 61 W</u> At proposed prod. zone <u>NE</u>		8. FARM OR LEASE NAME <u>UPRR</u>
14. PERMIT NO. <u>80-747</u>	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>5081 GR 5091 KB</u>	9. WELL NO. <u>#1-21</u>
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT <u>Wildcat</u>
NOTICE OF INTENTION TO:		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>21; 3 S; R 61 W</u>
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	12. COUNTY <u>Adams</u>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	13. STATE <u>Colorado</u>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>	
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	
(Other) <input type="checkbox"/>		
SUBSEQUENT REPORT OF:		
WATER SHUT-OFF <input type="checkbox"/>		REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>		ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>		ABANDONMENT <input checked="" 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.) <u>Date of work 7/26/80 Plugged & Abandoned</u>		

The well was spudded on 7/15/80, ran 174' of 8 5/8" which was set at 184', used 225 sacks of regular cement. The well was drilled to a total depth of 6874'. On 7/26/80, the well was plugged with 15 sacks at the base and 10 sacks at the top of the surface casing.



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

SIGNED [Signature] TITLE Vice-President DATE 9/8/80

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE SEP 15 1980
O & G CONS. COMM.

CONDITIONS OF APPROVAL, IF ANY:

X

Date 9/10/80

SEND FOR:

Form 4 _____

Form 5 _____

Cmt. Verif. _____

Form 10 _____

Logs ✓ cpl 9-22-80

Other Plat

Requested by: JD

SENT FOR:

Date 9-17-80

by: cpl