

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.



RECEIVED

3 1975

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Dry Hole</u> 222-4258		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR <u>Samedan Oil Corporation & LeClair-Westwood, Inc.</u>		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR <u>388 Denver Club Building, Denver, Colorado 80202</u>		8. FARM OR LEASE NAME <u>Carlson</u>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) <u>At surface</u> <u>At proposed prod. zone</u> <u>C NW NW Sec. 22-T3S-R61W</u>		9. WELL NO. <u>1</u>	
14. PERMIT NO. <u>74-951</u>		10. FIELD AND POOL, OR WILDCAT <u>Hombre</u>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>5085' G.L.</u>		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 22-T3S-R61W</u>	
		12. COUNTY <u>Adams</u>	13. STATE <u>Colorado</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input checked="" 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 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 December 20, 1974

We propose to plug as follows: (According to Colorado Oil and Gas Conservation Commission regulations)

20 sx. at bottom of surface pipe
10 sx. at top of surface pipe.

DVR	
FJP	✓
HRM	✓
JAM	✓
JJD	✓
GCH	✓
CGM	

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

SIGNED

W. H. Leach, Jr.

TITLE President

DATE Jan. 2, 1975

(This space for Federal or State office use)

APPROVED BY

McRogers

TITLE

DIRECTOR

DATE

JAN 13 1975

CONDITIONS OF APPROVAL, IF ANY.

Provided Fox Hills zone is plugged from 335' to 595' as per verbal instructions 12/20/74.