

OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

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

RECEIVED

DEC - 9 1968



COMM.
NATION AND SERIAL NO.

and
INDIAN, ALLOTTEE OR TRIBE NAME

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"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Sinclair Oil Corporation		8. FARM OR LEASE NAME L. Hiscock	
3. ADDRESS OF OPERATOR 501 Lincoln Tower Bldg., 1860 Lincoln St., Denver, Colo. 80203		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NE NE - 660' FN&EL Sec. 32-12N-54W At proposed prod. zone		10. FIELD AND POOL, OR WILDCAT Cliff - "D" Sand	
14. PERMIT NO. Mr. D. V. Rogers 8-8-68		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4546' GL.	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 32-12N-54W	
		12. COUNTY OR PARISH Logan	
		13. STATE Colorado	

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 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 checked="" 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.)

Plugging operations commenced 8-13-68. Pea gravel packed across perforations 5702-11'. Spotted 30 sack cement plug f/5700-5676', 10 sack cement plugs f/290-263' and f/27' to surface. Welded 1/4" steel plate on top of surface casing 18" below ground level. Completed, plugged, and abandoned as of 12 Noon 8-22-68. All equipment has been removed from the well and the location cleaned and leveled.

DVR	
FJP	<input checked="" type="checkbox"/>
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>

Ex Oil Prod.

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

SIGNED A. B. Parker
A. B. Parker

TITLE Supt., Dist. Production

DATE 12-6-68

(This space for Federal or State office use)

APPROVED BY D. V. Rogers
CONDITIONS OF APPROVAL, IF ANY:

TITLE DIRECTOR
O & G CONS. COMM.

DATE DEC 10 1968