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GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES
THE STATE OF COLORADORECEIVED
OCT 21 1977File 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> DRY HOLE		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR Apollo Enterprises, & Exeter Drlg. Northern, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 2300 Lincoln Center Bldg., Denver 80264		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 660' FWL & 660' FSL, Sec. 23-12N-55W At proposed prod. zone		8. FARM OR LEASE NAME Ross	
14. PERMIT NO. 76 1321		9. WELL NO. #1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4811' GR		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA SW SW 23-12N-55W	
		12. COUNTY Logan	
		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 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 P&A 8/14/77

Well was plugged as follows:

30 sx. 260'
10 sx. 10'

A steel cap was welded over top of surface.

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

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

SIGNED <u>[Signature]</u>	TITLE AGENT	DATE 10/19/77
(This space for Federal or State office use)		
APPROVED BY <u>[Signature]</u>	TITLE DIRECTOR D & C CONS. COMM.	DATE OCT 25 1977
CONDITIONS OF APPROVAL, IF ANY:		



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