

OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO



00241618

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JAN 14 1971

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

COLO. OIL & GAS CON. COMM.

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"/>		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR Prenalta Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Box 2514, Casper, Wyoming 82601		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 SW 1/4 NE 1/4 Sec. 12, T. 9N, R. 55W At proposed prod. zone 2040' FNL & 2020' FEL of Sec. 12 same		8. FARM OR LEASE NAME Mathewson	
14. PERMIT NO. 70-648		9. WELL NO. 32-12-9-55C	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4355' Gr., 4363' KB		10. FIELD AND POOL, OR WILDCAT Cottonwood Field	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12, T9N, R55W	
		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:		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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	(Other) _____
(Other) Geological Well History <input checked="" 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.)

DVR	
FJP	✓
HHM	✓
JAM	✓
JJD	✓

18. I hereby certify that the foregoing is true and correct
 PRENALTA CORPORATION
 SIGNED James G. Mathewson TITLE Vice President DATE Jan. 13, 1971

(This space for Federal or State office use)
 APPROVED BY [Signature] TITLE DIRECTOR DATE JAN 15 1971
 CONDITIONS OF APPROVAL, IF ANY:

gill