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CONSERVATION COMMISSION  
DEPT OF NATURAL RESOURCES  
STATE OF COLORADO

COLO. OIL & GAS CONS. COMM.

File 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 Dry Hole		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR Champlin Petroleum Company Attention: Ramona Rhoden		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 1257, Englewood, CO 80150		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 NW SE (1980' FSL & 1918' FEL) At proposed prod. zone		8. FARM OR LEASE NAME Downing 33-29	
14. PERMIT NO. 82 594		9. WELL NO. 1	
15. ELEVATIONS (Show whether OP, RT, GR, etc.) 5105' GL, 5116' KB		10. FIELD AND POOL, OR WILDCAT Wildcat/"J" Sand	
		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 29, T3S, R58W	
		12. COUNTY Adams	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 checked="" 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"/>	(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 4/25/82

Plug and abandon well as follows:

Plug #1: 6050-5812' w/70 sx. 'G' 4% HR-8.  
Plug #2: 340-150' w/60 sx. 'G'.  
Plug #3: 30'-surface w/10 sx. 'G'

Cut surface pipe off 3' below ground level and weld steel plate on top.  
Rig released @ 4:00 P.M. 4/25/82.

Location will be restored by July 1, 1982.

Verbal approval to plug obtained from Frank Piro 4/22/82.

DVR	
FJP	
JAM	✓
JJD	
RLS	
CGM	✓



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

SIGNED Ramona J. Rhoden TITLE Sr. Engineering Aide DATE 4/26/82

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR O & G Cons. Comm. DATE MAY 10 1982

CONDITIONS OF APPROVAL IF ANY: