

STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES



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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR National Cooperative Refinery Association		6. INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 1775 Sherman St., Suite 3000, Denver, CO 80203		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 Section 22 At proposed prod. zone		8. FARM OR LEASE COMM. Maddern	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4985' DF		10. FIELD AND POOL, OR WILDCAT N. Roman Nose	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22-T3S-R58W	
		12. COUNTY Adams	13. STATE CO

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 checked="" type="checkbox"/>	ABANDON <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL, (Other) <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.)

18. Date of work _____ * Must be accompanied by a cement verification report.

Following the frac stimulation performed 11/20/86 the well has experienced a number of sand fill-up problems. NCRA proposes to clean out fill, drill out below the float collar to 5825' perforate from 5790'-5800' and breakdown the J-2 sand using 2% KCl water. The well is currently completed in the J-1 sand. We propose to leave the J-1 zone open as we believe it will eventually clean up and return to prefrac producing rates. A cement evaluation tool will be run to assure isolation of the J-2 sand.

FOR OFFICE USE ONLY

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

SIGNED A. M. O'Hare TITLE Joint Operations Supervisor DATE 1/21/87
(This space for Federal or State office use)

APPROVED BY [Signature] TITLE SUPR. PETROLEUM ENGINEER DATE JAN 27 1987
Oil & Gas Cons. Comm.

CONDITIONS OF APPROVAL, IF ANY:

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