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

Use for Patented and Federal lands.  
Use 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<br>National Cooperative Refinery Association   |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                  |                 |
| 3. ADDRESS OF OPERATOR<br>1775 Sherman Street, Suite 3000, Denver, CO 80203  |  | 7. UNIT AGREEMENT NAME  |                 |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface 1980' FSL & 1980' FEL (NW SE)<br>At proposed prod. zone |  | 8. FARM OR LEASE NAME<br>Maddern 03195                                |                 |
| 14. PERMIT NO.<br>831210   |  | 9. WELL NO.<br>1  |                 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>GL 4976'; KB 4986'   |  | 10. FIELD AND POOL, OR WILDCAT<br>Roman Nose, North                   |                 |
|  |  | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Sec. 22, T3S-R58W |                 |
|  |  | 12. COUNTY<br>Adams   | 13. STATE<br>CO |

**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.)

18. Date of work September 6 thru 22, 1989 \* Must be accompanied by a cement verification report

Move in and rigged up service unit. Spot sand from 5800' to 5700'. Dump 5 sacks cement on sand and loaded hole. Backed off casing at 4920'. Recovered 115 joints of 5-1/2" casing. Set 25 sacks cement from 322' to 277'. Filled with mud to 30'. Set 10 sacks cement to 4' below ground level. Cut off surface casing at 4' and weld on cap. Location returned to natural contour.

*Remove tank battery & risers and reclaim site.*

EXHAUSTED OIL WELL

RECEIVED

OCT 10 1989



00401146

COLO. OIL & GAS CONS. COMM.

19. I hereby certify that the foregoing is true and correct  
SIGNED Morris Bell TITLE District Engineer DATE October 4, 1989

(This space for Federal or State office use)  
APPROVED BY [Signature] TITLE SURV. PERMITS DATE 10/19/89  
CONDITIONS OF APPROVAL, IF ANY:

FOR OFFICE USE ONLY  
ET  
UC  
MP

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