



UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 CHEVRON U.S.A. INC.		Fee
3. ADDRESS OF OPERATOR P. O. Box 599, Denver, Colorado 80201		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 641' FSL & 658' FEL (SE $\frac{1}{4}$ SE $\frac{1}{4}$)		7. UNIT AGREEMENT NAME Pierce
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) KB 5060	8. FARM OR LEASE NAME M. A. Andre
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		9. WELL NO. 1
NOTICE OF INTENTION TO:		10. FIELD AND POOL, OR WILDCAT Pierce - Lyons
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 22, T-8-N, R-66-W, 6th PM
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	12. COUNTY OR PARISH
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>	13. STATE Weld Colorado
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	
(Other) <input type="checkbox"/>		
		SUBSEQUENT REPORT OF:
		WATER SHUT-OFF <input type="checkbox"/>
		REPAIRING WELL <input type="checkbox"/>
		FRACTURE TREATMENT <input type="checkbox"/>
		ALTERING CASING <input type="checkbox"/>
		SHOOTING OR ACIDIZING <input type="checkbox"/>
		ABANDONMENT* <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.)*		

It is proposed to plug and abandon well as per the attached procedure.

RECEIVED

JUN 19 1978

COLO. OIL & GAS CONS. COMM.

No additional surface disturbances required for this activity.

- 3 - USGS
- 2 - State
- 2 - Partners
- 1 - WSB
- 1 - DLD
- 1 - Sec. 723
- 1 - File

DVR
FJP
HHM
JAM
JJD
RLS
CGM

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

SIGNED [Signature] TITLE Engineering Assistant DATE June 15, 1978

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE JUN 26 1978

CONDITIONS OF APPROVAL, IF ANY: [Signature]

*See Instructions on Reverse Side