



OGCC FORM 4

REV. 7-64

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

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

RECEIVED
JUL 24 1978

5. LEASE DESIGNATION AND SERIAL NO. **COLORADO OIL & GAS CONSERVATION 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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR Inexco Oil Company		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR 308 Lincoln Tower Building, Denver, CO 80295		8. FARM OR LEASE NAME King Pyles
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface At proposed prod. zone NE SE, Section 8 T19S, R45W		9. WELL NO. #3
14. PERMIT NO. 71-266		10. FIELD AND POOL, OR WILDCAT Brandon
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3872' GR		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NE SE, Section 8 T19S, R45W
		12. COUNTY Kiowa
		13. STATE Colorado

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>	ABANDON	<input type="checkbox"/>
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.)

Date of work July-August, 1978

Present Status: Well is producing from Mississippian perfs: 4602'-4690'.

Proposed Work: MI and RU pulling unit. POOH with production equipment. Run bit and casing scraper to PBTD - 4691'. RIH with packer. Set packer at \pm 4500'. Acidize Mississippian perfs - 4602'-4690' with 7,500 gallons of MOD-202 acid. Swab well to clean up fines. Run production equipment. Put well on pump.

DVR
FJP
HHH
JAM
JJD
RLS
OGM

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

SIGNED

W. R. EmmettTITLE Division Production Manager DATE 7/19/78

(This space for Federal or State office use)

DIRECTOR

O & G CON. COMM.

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

JUL 26 1978

file
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