

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

RECEIVED
NOV 20 1978



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

COLORADO OIL & GAS CONSERVATION COMMISSION

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 Inexco Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 308 Lincoln Tower Building, Denver, Colorado 80295		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 At proposed prod. zone		8. FARM OR LEASE NAME NWBU	
SW NW, Section 4 T19S, R45W 660' E of W and 1980' S of N line		9. WELL NO. #4	
14. PERMIT NO. 67-369		10. FIELD AND POOL, OR WILDCAT Brandon	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3884' GR and 3893' KB		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SW NW, Section 4 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:		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 <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 December, 1978

PRESENT OPERATIONS: Well is producing from Mississippian perfs - 4547'-4799'

PROPOSED WORK: To acidize well as follows:

MI and RU. POOH with production equipment. Run bit and casing scraper. RIH with tubing and packer. Set packer at ± 4500'. Acidize Mississippian perfs, 4547'-4712', down 2 7/8" tubing with 9,000 gallons of MOD-202 acid. Swab well. TOH with tubing and packer. Run production equipment. Put well on pump.

DVR	
FJP	✓
HHM	✓
JAM	✓
JJD	✓
RLS	
CGM	

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

SIGNED WR Emmett TITLE Division Production Manager DATE 11/16/78

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE NOV 21 1978

CONDITIONS OF APPROVAL, IF ANY:

file