

# 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  
FEB 11 1976  
COLO. OIL & GAS CON. COMM.

6. IF  00525691

## 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.)

<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. NAME OF OPERATOR <u>Inexco Oil Company</u></p> <p>3. ADDRESS OF OPERATOR <u>308 Lincoln Tower Building, Denver, Colorado 80203</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <u>NW NW Section 9-Township 19-South, Range 45 West</u> At proposed prod. zone <u>660' FNL, 660' FWL</u></p> <p>14. PERMIT NO. <u>68319 72-796</u></p>	<p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME <u>Dawson A</u></p> <p>9. WELL NO. <u>#4</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Brandon</u></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Section 9</u> <u>T-19-S, R-45-W</u></p> <p>12. COUNTY <u>Kiowa</u></p> <p>13. STATE <u>Colorado</u></p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>3893' GR</u></p>	

### 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 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 checked="" 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 May 1975

Well was plugged and abandoned as follows:

1. 25 sx plugged across perforations 4634'-4663', and 4576'-4610'.
2. Recovered maximum 5 1/2" casing. Top of cement at 4100'.
3. 25 sx plugged at casing stub.
4. 10 sx plugged at 184' (bottom of surface casing)
5. 5 sx plugged at surface.

Welded on plate and installed dry hole marker.

DVR	
FJP	
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
GCH	<input checked="" type="checkbox"/>
CCM	<input checked="" type="checkbox"/>

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

SIGNED <u>WR Emmett</u>	TITLE <u>Division Production Mgr.</u>	DATE <u>2-9-76</u>
<p>(This space for Federal or State office use)</p> <p>APPROVED BY <u>W. R. Rogers</u> TITLE <u>DIRECTOR</u> DATE <u>MAR 4 1976</u></p> <p>CONDITIONS OF APPROVAL, IF ANY:</p>		

DIRECTOR  
O & G CONS. COMM.