

OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

File in duplicate for Patented and Federal lands.
File in triplicate 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry Hole		<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED OCT 13 1966 </div>	
2. NAME OF OPERATOR Chevron Oil Company, Western Division		5. LEASE DESIGNATION AND SERIAL NO. Fee	
3. ADDRESS OF OPERATOR P. O. Box 220, Casper, Wyoming 82601		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 660 Ft S of N & 660 Ft W of E Line (NE 1/4 NE 1/4) At proposed prod. zone		7. UNIT AGREEMENT NAME 	
14. PERMIT NO. 66-383		15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 3906.6 Ft.	
		8. FARM OR LEASE NAME Chivington Grazing Assn.	
		9. WELL NO. 2	
		10. FIELD AND POOL, OR WILDCAT Brandon-Mississippian	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4, T19S., R45W., 6th P.M.	
		12. COUNTY OR PARISH 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 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.)

Following procedure used in plugging and abandoning:

1. Set 50 sack cement plug at 4450-4600.
2. Set 50 sack cement plug at 3550-3700.
3. Set 50 sack cement plug at 150-300.
4. 5 sack cement plug at surface of 8 5/8".
5. Welded plate on 8 5/8" casing 3 feet below ground level.

Released drilling rig 12:00 Midnight, 10-8-66.

DVR	
WRS	
HHM	✓
JAM	
FJP	
JJD	
FILE	

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

SIGNED

P. F. Hamilton

TITLE

**P. F. HAMILTON
Lead Drilling Engineer**

DATE

October 10, 1966

(This space for Federal or State office use)

APPROVED BY

W. Rogers

TITLE

Director

DATE

OCT 14 1966

CONDITIONS OF APPROVAL, IF ANY: