

OIL AND  
OF

ON

RECEIVED

AUG 20 1969

99999999

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

COLO. OIL

5. LEASE DESIGNATION AND SERIAL NO.  
& GAS CONS. 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.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Enbrook Oil &amp; Gas Company

3. ADDRESS OF OPERATOR

622 Patterson Building Denver, Colorado 80202

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

660' FSL

660' FWL

14. PERMIT NO.

69-479

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GL 4834

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lewis Ross

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

SW SW Sec. 26 3S 55W

12. COUNTY OR PARISH

Washington

13. STATE

Colorado

16.

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON

REPAIR WELL

CHANGE PLANS

(Other)

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT

(Other)

(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 8/14/69 - 8/19/69

Drilled to TD &amp; Logged.

P &amp; A

15 sax Bottom of Surface Pipe.

10 sax Top of Surface Pipe.

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

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

SIGNED

Guy W. Tucker

TITLE Agent

DATE 8/20/69

(This space for Federal or State office use)

APPROVED BY

W. Rogers

TITLE

DIRECTOR

O &amp; G CONS. COMM.

DATE

AUG 22 1969

CONDITIONS OF APPROVAL, IF ANY:



00416075