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OGCC FORM 4

OIL AND GAS CONSERVATION COMMISSION

REV. 7-



DEPARTMENT OF NATURAL RESOURCES
STATE OF COLORADO

...cate for Patented and Federal lands.
...rite in triplicate for State lands.

5. LEASE DESIGNATION AND SERIAL NO.
COLO. OIL & 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR J. W. NYLUND 741-0242		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 5660 S. Syracuse Circle, #514, Englewood, CO 80111		8. FARM OR LEASE NAME Gade	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FSL; 605' FWL; SW SW Sec. 13-T3S-R55W At proposed prod. zone SAME		9. WELL NO. #1	
14. PERMIT NO. 85-1333		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4797' GL, 4809' KB	
		12. COUNTY Washington	13. STATE CO
		10. FIELD AND POOL, OR WILDCAT Mescalero	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SW SW Sec. 13-T3S-R55W	

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"/>	FULL 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 type="checkbox"/>	ABANDON <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input checked="" 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 11/16/85

WELL WAS PLUGGED WITH 20 SACKS CEMENT IN BOTTOM OF SURFACE CASING AND 10 SACKS IN TOP AS PER TELEPHONE INSTRUCTIONS FROM HACK MORRELL, COLORADO OIL AND GAS CONSERVATION COMMISSION.

Hole is P+A, pits still open and full. ^{Mouse} ~~But~~ hole still open. No surf equip on location csg not visible. Location surrounded by a wheat field. called ✓

WTS	
DP	
PCN	
RAM	
ROD	✓
BAR	✓
LOG	
CP	

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

SIGNED Mel Christensen TITLE Drilling & Prod. Admin. DATE 12/16/85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

