

LOCATION S/2 NW NW 17.35, SSW  
OPERATOR DW Nyland  
WELL NAME Jolly 1-A

FIELD WC  
COUNTY Washington  
FORMATION \_\_\_\_\_



DATE OF INSPECTION DURING DRILLING: \_\_\_\_\_

RIG \_\_\_\_\_ SURFACE CASING: \_\_\_\_\_  
BOP'S \_\_\_\_\_ DEPTH \_\_\_\_\_ WOC \_\_\_\_\_  
CONTACT \_\_\_\_\_ CMT VOL \_\_\_\_\_ RETURNS \_\_\_\_\_  
ADEQUATE AQUIFER PROTECTION? \_\_\_\_\_  
COMMENTS \_\_\_\_\_

DATE OF INSPECTION AFTER COMPLETION: \_\_\_\_\_

FRACED: \_\_\_\_\_ PRODUCTION STRING: \_\_\_\_\_  
CBL CHECKED? \_\_\_\_\_ DEPTH \_\_\_\_\_ STAGED \_\_\_\_\_  
WATER DISPOSAL METHOD \_\_\_\_\_  
PITS: PERMIT \_\_\_\_\_ TDS \_\_\_\_\_ SKIM TANK \_\_\_\_\_  
DIMENSION: \_\_\_\_\_ SCREEN: \_\_\_\_\_ LINER: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
LEASE SIGN: \_\_\_\_\_ TANK ID: \_\_\_\_\_ FENCED? \_\_\_\_\_  
SURFACE EQUIPMENT: \_\_\_\_\_

DATE OF FINAL P&A INSPECTION 10/30/85

PLUG 1 35 SX @ 4970 SURFACE RECLAIMED? yes  
PLUG 2 20 SX @ bottom of surface SITE CLEAN? yes  
PLUG 3 10 SX @ surface LANDOWNER RELEASE? \_\_\_\_\_

INSPECTOR ICB

PA INSP

RECEIVED

JUL 11 1985

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.

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. <b>COLO. OIL &amp; GAS CONS. COMM.</b>	
2. NAME OF OPERATOR <b>J. W. NYLUND</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR <b>5660 S. Syracuse Circle, #514, Englewood, CO 80111</b>		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 <b>900' FNL, 660' FWL; S/2 NW NW</b>		8. FARM OR LEASE NAME <b>Jolly</b>	
At proposed prod. zone <b>SAME</b>		9. WELL NO. <b>1-A</b>	
14. PERMIT NO. <b>85-775</b>		10. FIELD AND POOL, OR WILDCAT <b>Wildcat</b>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>4691' GL, 4699' KB</b>		11. SEC., T., R., M., OR BLEK. AND SURVEY OR AREA <b>Sec. 17-T3S-R55W</b>	
		12. COUNTY <b>Washington</b>	13. STATE <b>CO</b>

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 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"/>	(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 7/04/85

Well was plugged with 35 sx at 4970';  
20 sx at bottom of surface casing, 1/2 in 1/2 out;  
10 sx on top.

As per telephone instructions from William Smith, Director, Colorado Oil and Gas Conservation Commission.

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

SIGNED Melva A. Christensen TITLE Drilling & Prod. Admin.

DATE 7/09/85

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_