

# 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.



00219595

## 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"/> Wildcat		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR Fuel Resources Development Co.		Fee	
3. ADDRESS OF OPERATOR P. O. Box 840, Denver, CO 80201		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 See application to drill At proposed prod. zone		7. UNIT AGREEMENT NAME	
14. PERMIT NO. 71 966		8. FARM OR LEASE NAME Thayer	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4955' GR, 4965' KB		9. WELL NO. #1	
		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T6N, R67W, 6th P.M.	
		12. COUNTY Weld	13. STATE Colo.

### 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 Completed on 9-5-72

8-23-72 Moved Donnelly casing pullers over hole.  
8-24-72 Pulled 7806' 2-3/8" EUE Tubing  
8-25-72 Weather Bad  
8-26-72 Set bottom plug; cement top 7350' calculated. Shot pipe with 90M strain. Pulled to 150 M, pipe stuck.  
8-28-72 Pulled 225 M - pipe wouldn't move.  
8-29-72 Reshot pipe @ 6477' with 150 M strain. Pipe came loose at 210 M.  
8-30-72 Pulled 6477' 4 1/2" N80 casing  
9-1-72 Moved rig off.  
9-5-72 Removed casing and tubing and cleaned up location.

DVR	
FJP	✓
HHM	✓
JAM	✓
JJD	✓

Plugs set at 7775-7488, 10 sks bottom surface casing at 211', 10 sks. @ surface.  
8-5/8" surface casing cut off below plow depth.

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

SIGNED

E. J. Schuh

TITLE Supv. of Exploration & Operation

DATE 9-20-72

(This space for Federal or State office use)

DIRECTOR

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

O & G CONSL. COMM.

DATE

OCT 4 1972