



00212702

OGCC FORM 4  
Rev. 8/89STATE OF COLORADO  
OIL AND GAS CONSERVATION COMMISSION  
DEPARTMENT OF NATURAL RESOURCES

SUBMIT ORIGINAL AND 1 COPY

FOR OFFICE USE ONLY  
ET  FE  UC  SE 

## 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.)

<input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER			5. FEDERAL/INDIAN OR STATE LEASE NO.
1. NAME OF OPERATOR Fountainhead Resources, Ltd.		6. PERMIT NO.	
3. ADDRESS OF OPERATOR 621-17th Street, Ste 1421		7. API NO. 05-123-11300	8. WELL NAME Altergott
CITY Denver	STATE CO	ZIP CODE 80293	9. WELL NUMBER #1
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		10. FIELD OR WILDCAT La Poudre	11. QTR. QTR. SEC., T.R. AND MERIDIAN SWSE-22-6N-67W
		12. COUNTY Weld	

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

## 13A. NOTICE OF INTENTION TO:

- PLUG AND ABANDON  
 MULTIPLE COMPLETION  
 COMMINGLE ZONES  
 FRACTURE TREAT  
 REPAIR WELL  
 OTHER \_\_\_\_\_

## 13B. SUBSEQUENT REPORT OF:

- FINAL PLUG AND ABANDONMENT  
(SUBMIT 3RD PARTY CEMENT VERIFICATION  
AND JOB LOG)  
 ABANDONED LOCATION (WELL NEVER DRILLED -  
SITE MUST BE RESTORED WITHIN 6 MONTHS)  
 REPAIRED WELL  
 OTHER \_\_\_\_\_  
\*Use Form 3 - Well Completion or Recompletion Report and Log  
for subsequent reports of Multiple/Commingle Completions  
and Recompletions

## 13C. NOTIFICATION OF:

- SHUT-IN, TEMPORARILY ABANDONED  
(DATE \_\_\_\_\_)  
(REQUIRED EVERY 6 MONTHS)  
 PRODUCTION RESUMED  
(DATE \_\_\_\_\_)  
 LOCATION CHANGE (SUBMIT NEW PLAT)  
 WELL NAME CHANGE  
 OTHER \_\_\_\_\_

14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (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)

15. DATE OF WORK 4/19/90

CIBP @ 6700' + 3 Sacks  
 30 Sacks @ 2300'  
 40 Sacks 1/2 in and 1/2 out @ 260'  
 10 Sacks @ top surface  
 Cut and weld plate 4' below ground level

RECEIVED

SEP 19 1991

COLO. OIL &amp; GAS CONS. COM.

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

SIGNED

TELEPHONE NO. 296-1421

NAME (PRINT)

David A. Gottenborg

TITLE Manager

DATE 9/18/91

(This space for Federal or State office use)

APPROVED

TITLE

Engr.

DATE

SEP 20 1991

CONDITIONS OF APPROVAL, IF ANY: