

STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION

00695811

DEPARTMENT OF NATURAL RESOURCES

RECEIVED

in duplicate for Patented and Federal lands.
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.

5. LEASE DESIGNATION & SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

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

12. COUNTY

13. STATE

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Barrett Energy Company

#06495

3. ADDRESS OF OPERATOR

221 E. 29th Suite 240 Loveland, Colorado 80538

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.

See also space 17 below.)

At surface

600' FNL 1700' FWL Sec. 13-33S-44W

At proposed prod. zone

14. PERMIT NO.

84-806

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

4027' G.L.

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON

REPAIR WELL,

CHANGE PLANS:

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Status Update

☒(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.)

18. Date of work

* Must be accompanied by a cement verification report.

This well is SI WO Pipeline Hookup.

WRS	
ROP	
HUM	
LAV	
ROC	
LAR	
CSM	
ED	

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

SIGNED

Mike Evers

TITLE

Operations Manager

DATE

10-20-86

(This space for Federal or State office use)

APPROVED BY

G. A. [Signature]

TITLE

SUPR. PETROLEUM ENGINEER

Oil & Gas Cons. Comm.

DATE

OCT 27 1986

CONDITIONS OF APPROVAL, IF ANY: