



00591595

STATE OF COLORADO  
OIL AND GAS CONSERVATION COMMISSION  
DEPARTMENT OF NATURAL RESOURCES

SUBMIT ORIGINAL AND 1 COPY

FOR OFFICE USE ONLY			
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**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 type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER		5. FEDERAL, INDIAN OR STATE LEASE NO.
2. NAME OF OPERATOR		6. PERMIT NO.
WESTERN OIL CORPORATION		90 1158
3. ADDRESS OF OPERATOR		7. API NO.
P.O. BOX 281304		05 071 6173
CITY	STATE	8. WELL NAME
LAKEWOOD	CO	PICKETWIRE
ZIP CODE		9. WELL NUMBER
80215		29-3
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements See also space 17 below )		10. FIELD OR WILDCAT
At surface		APACHE CANYON
635' FNL & 1760' FWL		11. QTR. QTR. SEC., T.R. AND MERIDIAN
At proposed prod. zone		NE 1/4 NW 1/4 SEC 29
635' FNL & 1760' FWL		T33S, R67W, 6thPM
12. COUNTY		
LAS ANIMAS		

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 WELL STATUS

\* Use Form 5 - Well Completion or Recompletion Report and Log for subsequent report of Multiple Commingled 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 2/91-Present

02/26/91 Drld cmt & rettainer; Successfully pressure test to 500 psi.

04/03/91 WO further completion.

**RECEIVED**

APR 8 1991

COLO. OIL & GAS CONS. COMM.

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

SIGNED

*Dana K. Greathouse*

TELEPHONE NO. 303/980-9340

NAME (PRINT) Dana K. Greathouse

TITLE Engineering Technician

DATE 4/3/91

(This space for Federal or State office use)

APPROVED

TITLE

**APPROVED**

DATE

CONDITIONS OF APPROVAL, IF ANY: