

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



duplicate for Patented and Federal lands.
triplicate for State lands.

RECEIVED
AUG 5 1980
COLO. OIL & GAS COM. COMM.

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"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR PHILLIPS PETROLEUM COMPANY		8. FARM OR LEASE NAME MILLER KB	
3. ADDRESS OF OPERATOR P. O. Box 2920, Casper, WY 82602		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL & 660' FEL At proposed prod. zone		10. FIELD AND POOL, OR WILDCAT Ladder Creek, Spergen	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12 T15S-R45W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4292 RKB		12. COUNTY Cheyenne	13. STATE Colorado

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS: <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) Squeeze & Reperf <input checked="" 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.)

18. Date of work _____ * Must be accompanied by a cement verification report.

Propose to squeeze and reperforate Spergen formation: ✓

5270 - 72'
5284 - 86'
5287 - 92'

Acid cleanup with 100 gal. 15% HCl

DVR	
FJP	
HHM	✓
JAM	✓
JJD	✓
RLS	
CGM	

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

SIGNED D. J. Fisher TITLE Operations Superintendent DATE 8/1/80

(This space for Federal or State office use)

APPROVED BY D. V. Rogers TITLE DIRECTOR DATE AUG 6 1980

CONDITIONS OF APPROVAL, IF ANY: _____

file