



00048020

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

RECEIVED

MAR 10 1980

COLO. OIL & GAS CONS. COM.

File in duplicate for Patented and Federal lands.
File 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry Hole		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR Transcontinental Oil Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR c/o Helton Engineering & Geological Services, Inc. 860 Anaconda Tower, 555 - 17th Street, Denver, Colorado 80202		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' EWL & 660' NSL Sec 33 (C SWSW) At proposed prod. zone Same		8. FARM OR LEASE NAME D. Tuttle	
14. PERMIT NO. 8055		9. WELL NO. 1-33	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4585 K.B.		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 33-T2N-R54W	
		12. COUNTY Washington	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 checked="" 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) <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 3-5-80

8-5/8" casing at 133' cemented with 120 sx.
 Hole full of 9.8 ppg mud.
 Plan to plug and abandon as follows:

1. 20 sx cement across bottom of surface pipe (105'-160')
2. 10 sx cement at top of surface casing (3'-28')
3. Cut surface casing off below plow depth and weld steel plate on top of casing.

Verbal approval received from M. H. H. Morrell by Mr. H. C. Allen.

DWR	<input checked="" type="checkbox"/>
FOP	<input checked="" type="checkbox"/>
HMM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
RLS	<input type="checkbox"/>
CBM	<input type="checkbox"/>

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

SIGNED Charles O. Clark TITLE Acting for Transcontinental Corporation DATE 3-7-80
 (This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR O&G CONS. COM. DATE MAR 10 1980
 CONDITIONS OF APPROVAL, IF ANY:

H

X