

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

RECEIVED

MAR 12 1979



00264272

File in duplicate for Patented and Federal lands. GOLD. OIL & GAS CONSERVATION COMMISSION
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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR J & L Oil Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 17566 Rd 30 Sterling, Colo. 80751		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 <u>NE NW</u> 2073'FWL & 668'FNL		8. FARM OR LEASE NAME Padroni
At proposed prod. zone Same		9. WELL NO. 2
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	10. FIELD AND POOL, OR WILDCAT SURVEY OR AREA Cayuse
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 30-9N-52W
		12. COUNTY Logan
		13. STATE Colo

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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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 As soon as a casing puller is available, approximately 1 month.

✓ Application to plug as follows:

- Run sand on top of and above casing perforations.
- Put 5 sacks cement on top of sand
- Put 20 sacks cement in and out bottom of surface casing
- Also 10 sacks cement in top of surface casing
- Weld plate on top of surface casing 3 feet below ground level

DVR	<input checked="" type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
RLS	<input type="checkbox"/>
CSA	<input type="checkbox"/>

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

SIGNED John H. [Signature] TITLE Pres. DATE 3-10-79

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE MAR 12 1979

CONDITIONS OF APPROVAL, IF ANY: