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OCT 27 1977  
CONSERVATION COMMISSION  
DEPARTMENT OF NATURAL RESOURCES  
STATE OF COLORADO

087-07411

Rate for Patented and Federal lands.  
Rate for State lands.

COLORADO OIL & GAS CONSERVATION COMMISSION

### 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"/> <b>Dry Hole</b>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR <b>Thomas B. Burns</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <b>470 Denver Club Bldg., Denver, Colorado 80202</b>		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 <b>2137' FNL, 660' FEL (SE/4NE/4)</b> At proposed prod. zone <b>Same</b>		8. FARM OR LEASE NAME <b>Sailsbery</b>
14. PERMIT NO. <b>77 459</b>		9. WELL NO. <b>4-24</b>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>4452' Gr., 4463' K.B.</b>		10. FIELD AND POOL, OR WILDCAT <b>Wildcat</b>
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 4-T2N-R57W</b>
		12. COUNTY <b>Morgan</b>
		13. STATE <b>Colorado</b>

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 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 August 21, 1977

Well was spudded on August 15, 1977. After setting 8-5/8" surface casing at 121.04' K.B., well was drilled to total depth of 5640' and electric logs run. One drill stem test was run in "D" Sand to evaluate possible pay zones. Test results were negative so well was plugged and abandoned as follows:

- 15-sack plug at the base of the surface casing
- 10-sack plug at the top of the surface casing
- Surface pipe was cut and a metal plate welded at the surface

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"/>
CGM	<input type="checkbox"/>

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

SIGNED Thomas B. Burns TITLE Operator DATE 8-25-77  
 (This space for Federal or State office use) DIRECTOR  
 APPROVED BY [Signature] TITLE O & G CONS. COMM. DATE OCT 31 1977  
 CONDITIONS OF APPROVAL, IF ANY:



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