

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

RECEIVED

SEP 8 1981



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

COLO. OIL & GAS CONS.

LEASE DESIGNATION AND SERIAL NO.

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"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR J. W. Nylund		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 5680 S. Syracuse Circle, Room 502, Englewood, CO 80111		8. FARM OR LEASE NAME Smart	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FWL; 1980' FSL Sec. 10-T2N-R56W At proposed prod. zone Same		9. WELL NO. 1	
14. PERMIT NO. 811206		10. FIELD AND POOL OR WILDCAT Wildcat	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4322 GL; 4330' KB		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW SW 10-T2N-R56W	
		12. COUNTY Morgan	13. STATE Colorado

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT ☒

(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 P & A 7/26/81

The well was plugged as follows:

15 sacks in bottom

10 sacks in top

OVR	
FJP	
HHM	
JAM	✓
JUD	✓
RLS	
CGM	

Attachment: PEDCO Plugging Report

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

SIGNED Glenn C. Smith

TITLE

Office Manager

DATE 9/3/81

(This space for Federal or State office use)

APPROVED BY W. Rogers

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DIRECTOR
O & G Cons. CommDATE SEP 9 1981