

OIL AND GAS CONSERVATION COMMISSION

DEPARTMENT OF NATURAL RESOURCES

THE STATE OF COLORADO

RECEIVED
JAN 13 1972

REV.



00229855

icate for Patented and Federal lands.
icate 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 Art Guida-Scoggins Petroleum Co., -Cow Gulch Oil Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box G, Akron, Colo. 80720		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 C SESE 15-3S-56W At proposed prod. zone		8. FARM OR LEASE NAME Jolly-Dalgetty
14. PERMIT NO. 71-936	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4825' FR	9. WELL NO. #1
		10. FIELD AND POOL, OR WILDCAT Wildcat ✓
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 15-3S-56W
		12. COUNTY Washington
		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"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input checked="" 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 P&A 12/29/71 ✓

Well was plugged in following manner:

15 sx. bottom of surf.
10 sx. top of surf.

Steel cap was welded over top of surf.

DVR	
FJP	✓
HHM	✓
JAM	✓
LID	✓

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

SIGNED _____ TITLE AGENT DATE 1/11/72

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE JAN 18 1972

CONDITIONS OF APPROVAL, IF ANY:

DIRECTOR

O & G COMM. COMM.