

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

RECEIVED

DEC 6 1972

OIL AND GAS CONSERVATION COMM.



00091774

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR A. T. Skaer		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 620 Patterson Building, 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 At proposed prod. zone C --- NW NE		8. FARM OR LEASE NAME Lee-Lusby	
14. PERMIT NO. @ ? 72-439		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4496 GR		10. FIELD AND POOL, OR WILDCAT Wildcat Lee	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 2 --- 2 N --- 57 W	
		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 <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"/>	

SUBSEQUENT REPORT OF:

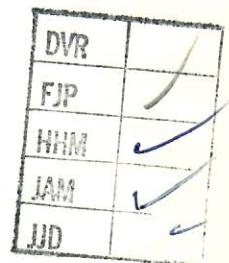
WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

(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 11-10-72

Moved Baney Well Service Rig in 7 washed well down to 5540'--circulated hole and started out to run casing-- Bit stuck in bentonite and jumped pin out of coupling on 74th joint in hole--Endeavored to fish tubing--unsuccessful--left 106 jts of tubing--collar & bit in hole. Put 15 sax cement--plug at bottom of surface pipe & 10 sax cement plug in top of surface pipe--cleaned up location.



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

SIGNED _____ TITLE _____ DATE 12/5/72

(This space for Federal or State office use)

APPROVED BY Al Rogers TITLE DIRECTOR O & G CON. COMM. DATE DEC 11 1972

CONDITIONS OF APPROVAL, IF ANY: