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OGCC FORM 4

REV. 7-64

OIL AND GAS CONSERVATION COMMISSION

DEPARTMENT OF NATURAL RESOURCES

OF THE STATE OF COLORADO

JUN 28 1974

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

COLO. OIL & GAS CONS. COMM.

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 ☐ GAS WELL ☒ OTHER ☐ *Bill Richardson*

2. NAME OF OPERATOR  
*DYCO PETROLEUM CORPORATION* *893-1062*

3. ADDRESS OF OPERATOR  
*1700 Philtower Building, Tulsa, Oklahoma 74103*

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface *660' FNL & 1320' FWL of NW/4*  
At proposed prod. zone  
*Same*

14. PERMIT NO.  
*N/A*

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
*4503' GR*



5. LEASE DESIGNATION AND SERIAL NO.  
*N/A*

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
*N/A*

7. UNIT AGREEMENT NAME  
*N/A*

8. FARM OR LEASE NAME  
*Lousberg*

9. WELL NO.  
*1-A*

10. FIELD AND POOL, OR WILDCAT  
*Unnamed - "J" Sand*

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
*19-9N-56W*

12. COUNTY  
*Weld*

13. STATE  
*Colo.*

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 checked="" 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 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 \_\_\_\_\_

Dump 15 sx of cement in the bottom of hole, fill the casing with mud laden fluid and spot a 30' plug 1/2 above and 1/2 below the surface casing shoe.

*Dyco Petroleum Called 7/9/74  
Gave verbal to plug 25  
above with additional plug  
at stub after pulling csg. (10sx) &  
10 sax plug @ surface. JPD.*

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

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

SIGNED *Bill J. Bussey*

TITLE *Manager of Engineering*

DATE *6/25/74*

(This space for Federal or State office use)

APPROVED BY *[Signature]*  
CONDITIONS OF APPROVAL, IF ANY: *[Signature]*

TITLE

DATE

JUL 9 1974

X