

OIL AND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADO

RECEIVED

FEB 13 1969

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

COLORADO OIL & GAS COMMISSION Chapel

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 checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. Chapel	
2. NAME OF OPERATOR Buttes Gas & Oil Co., Juniper Division		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 420 C. A. Johnson 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 NE, SE, NE, Sec 17, T9N, R56W (1650 ¹ FNL, 330 ¹ FEL) At proposed prod. zone Same		8. FARM OR LEASE NAME Chapel	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4512 ¹ K.B.		10. FIELD AND POOL, OR WILDCAT Cotton Valley	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 17-9N-56W	
		12. COUNTY OR PARISH Weld	
		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 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 March 15, 1969

Present Condition of Well

Total Depth 5882¹.9 5/8" surface casing cemented at 155¹ with 110 sx.5 1/2" production casing cemented at 5880¹ with 175 sx.Perforations ("D" Sand) 5746-5750¹ and 5756-5757¹, 36 holes - squeezed with 100 sx. Perforations ("J" Sand) 5827-5835¹, 4 HPF. Open.

Status: Shut in because of water intrusion.

Proposed Work

1. Blow well down and fill with mud.
2. Plug No. 1 5850-5700¹, 20 sx.
3. Cut and recover 5 1/2" casing. Plug No. 2 across 5 1/2" stub with 20 sx.
4. Plug No. 3 180-100¹, 20 sx.
5. Plug No. 4 surface with 5 sx.
6. Cut off casing head and erect marker.
7. Clean and restore location.

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

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

SIGNED

TITLE

Engineer

DATE

2/11/69

(This space for Federal or State office use)

APPROVED BY

TITLE

DIRECTOR

O & G CONS. COMM.

DATE

FEB 17 1969

CONDITIONS OF APPROVAL, IF ANY:

See Letter 7 5/29/69