

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



00216970

RECEIVED

MAR 14 1983

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 & SERIAL NO. N/A	
2. NAME OF OPERATOR Catamount Exploration, Inc./Exeter Drilling Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A	
3. ADDRESS OF OPERATOR P.O. Box 3013; Casper, Wyoming 82602		7. UNIT AGREEMENT NAME N/A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FEL & 1980' FSL, Sec. 34-T7N-R67W At proposed prod. zone		8. FARM OR LEASE NAME Felte	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4940' GI ; 4950' KB		10. FIELD AND POOL, OR WILDCAT South New Windsor	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34-T7N-R67W	
		12. COUNTY Weld	13. STATE CO

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"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Ran Casing</u> <input checked="" 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.)

18. Date of work 2-26-83 \* Must be accompanied by a cement verification report.

Spudded well 4:00 p.m; 2-26-83. Drilled 12 1/4" hole to 249' KB. Ran 223.7' of 8-5/8", 24 lb., casing. Cemented with 180 sx. Class 'G' and cement to surface with 3% CaCl<sub>2</sub>. Had good returns throughout. Drilled 7-7/8" hole to 4373' KB. Ran Dual Induction log and compensated Density log. Cemented with 150 sx. Class 'G' with 10% salt and 0.9% Halad-9 retarder. Ran 4380' of 4 1/2", 9.5 lb. casing, landed at 4372' KB. Otis sliding sleeve at 742' KB. Rigged down rotary rig and rigged up completion rig. Opened sliding sleeve and chemical squeezed Fox Hills water sand with 1000 gallons Halliburton An-Gel. Closed sleeve and pressured to 1000 psi.

Note: Lease name on APD is shown as Felke, correct name is Felte.

DVR	
FJP	
HAM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
RCC	
LAR	<input checked="" type="checkbox"/>
GCM	

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

SIGNED Jule E. Vaughan TITLE Agent DATE 3-11-83

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE MAR 16 1983  
O & G Cons. Comm.

CONDITIONS OF APPROVAL, IF ANY: