

OGC

REV.



00576142

ND GAS CONSERVATION COMMISSION
PARTMENT OF NATURAL RESOURCES
OF THE STATE OF COLORADO

API #05-123-7219

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.)

RECEIVED
JAN -6 1971

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR Pan American Petroleum Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1400, Riverton, Wyoming 82501		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 660' FSL 660' FEL SE SE Sec. 10 T2N R67W At proposed prod. zone		8. FARM OR LEASE NAME Gordon Turkey Farm
14. PERMIT NO. 70-707		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4957 GL 4966 RDB		10. FIELD AND POOL, OR WILDCAT Wildcat
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 10 T2N R67W
		12. COUNTY Weld
		13. STATE Colorado

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 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) <input checked="" type="checkbox"/> Setting Casing	<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 12/13/70 and 12/24/70

Well spudded 12/13/70 and drilled to TD 240 where 7 jts. 8-5/8" 24# casing was run and set at 233' RDB. Cemented with 200 sacks regular x 3% CaCl.

TD 8164 Ran 249 jts. 4-1/2" 10.5-11.6# CSA 8163' RDB. Cemented 1st stage x 200 sacks 50-50 pozmix, 2% gel, 10% salt x .75% TIC. Cemented 2nd stage x 200 sacks 50-50 pozmix x 2% gel.

DVR	
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 [Signature] TITLE Area Superintendent DATE 12/29/70

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE JAN 7 1971

CONDITIONS OF APPROVAL, IF ANY:

CONFIDENTIAL
released
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