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UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

GOLD 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 Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR
Chevron U.S.A., Inc.

3. ADDRESS OF OPERATOR
P. O. Box 599, Denver, CO 80201

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2640' FSL & 660' FEL **NESE**
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
C-21464

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Chevron Federal

9. WELL NO.
1-19

10. FIELD OR WILDCAT NAME
Egeria Creek Area - Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 19, T1N, R85W

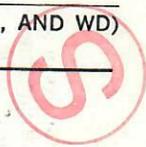
12. COUNTY OR PARISH
Routt

13. STATE
Colorado

14. API NO.
05 107 6129

15. ELEVATIONS (SHOW DF, KDB, AND WD)
GL 9,304'

Loc Ok
9/18/84



(NOTE: Report results of multiple completion or zone change on Form 9-330.)

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) Change BOPE Pressure Rating	<input type="checkbox"/>	<input type="checkbox"/>

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.)*

Request approval to change pressure rating of Blowout Prevention Equipment from 5000 psi working pressure to 3000 psi working pressure.

Verbal approval received from Bob Kaiser, BIM, Grand Junction, and Ed DiMatteo, Colorado Oil and Gas Commission on September 11, 1984.

WRS	
FJP	
HCU	✓
JM	✓
RCC	
LAR	✓
COM	
ED	



Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Jefferson TITLE Engineering Asst. DATE September 11, 1984

(This space for Federal or State office use)

APPROVED BY William Smith TITLE DIRECTOR DATE OCT 11 1984
O & G Cons. Comm.