



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

RECEIVED

12-312775

JUL 07 1986

Indicate for Patented and Federal lands
 Duplicate for State lands.

LEASE DESIGNATION & SERIAL NO.

SUNDRY NOTICES AND REPORTS ON WELLS CONS.COMM

(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"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY		8. FARM OR LEASE NAME GRAHAM	
3. ADDRESS OF OPERATOR P.O. BOX 39200 DENVER, COLORADO 80239		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1790' FNL 660' FEL SENE SEC. 12 At proposed prod. zone		10. FIELD AND POOL, OR WILDCAT SPINDLE	
14. PERMIT NO. 85-1528		15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 5101'	
		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"/>	

(Other) Cancellation of well

(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.)
Abandoned Location

18. Date of work _____ * Must be accompanied by a cement verification report.

Reference your letter of June 27, 1986 pertaining to the above referenced well (permit Number 85-1528). (This well was not and will not be drilled at this time.) A new Application for Permit to Drill will be submitted if current plans change.



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

SIGNED GR West/CJB TITLE Dist. Admin. Supr DATE 7/2/86

(This space for Federal or State office use)

APPROVED BY J. A. [Signature] TITLE SUPR. PETROLEUM ENGINEER DATE JUL 09 1986
Oil & Gas Cons. Comm.

CONDITIONS OF APPROVAL, IF ANY:



DR