

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



1c in duplicate for Patented and Federal lands.
 1c in triplicate for State lands.

RECEIVED**AUG 25 1976****COLO. 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 "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER Dry		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Webb Resources, Inc.		8. FARM OR LEASE NAME Webb Champlin	
3. ADDRESS OF OPERATOR 2200 First of Denver Plaza, Denver, Colorado 80202		9. WELL NO. #12-6 X	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface At proposed prod. zone 1515' FNL & 1515' FWL (NW SE NW Sec. 12)		10. FIELD AND POOL, OR WILDCAT Box Elder Creek Field	
14. PERMIT NO. 75-838		15. ELEVATIONS (Show whether DF, RT, GR, etc.) same 5397' Ground Level	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12-3S-65W		12. COUNTY Adams	
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"/>	FULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input 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 checked="" type="checkbox"/> Plugging	<input checked="" type="checkbox"/> X

(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 August 20, 1976

Unseated pump. Laid down rods in singles. Unseated tubing anchor. Plugged Perforations 8145-8154' w/10 sxs 1-1 Posmix and slurry volume of 10.04 bbls Approx. fillup from 8160-7730'. Preparing to salvage tubing. Will move in casing puller August 23, 1976.

DVR	
FJP	
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
GCH	
CGM	

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

SIGNED Roy A. Burt TITLE Engineer DATE 8-23-76
 (This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE AUG 27 1976
 CONDITIONS OF APPROVAL, IF ANY: O & G CONS. COMM.