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OGCC FORM 4

OIL AND GAS CONSERVATION COMMISSION

SEP -1 1971

REV. 7-64

DEPARTMENT OF NATURAL RESOURCES



STATE OF COLORADO

COLO. OIL & GAS CONS. COMM

or Patented and Federal lands.
or 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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER DRY HOLE		5. LEASE DESIGNATION AND SERIAL NO.	FEE
2. NAME OF OPERATOR The Anschutz Corporation, Inc. & Equity Oil Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 1110 Denver Club Bldg., Denver, Colo. 80202		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 NW$\frac{1}{4}$NW$\frac{1}{4}$ Sec. 5 650' SNL 660' ENL At proposed prod. zone		8. FARM OR LEASE NAME Qualls	9. WELL NO. 1
14. PERMIT NO. 71-507	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5348 KB 5336 GL	10. FIELD AND POOL, OR WILDCAT Wildcat	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 5-3S-64W
		12. COUNTY Adams	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"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

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 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 _____

This well was drilled to a total depth of 8227' through the Stray Skull Creek sand (below J-sand). IES and GR density logs were run to total depth. There were no cores. The D and J-sands logs were very tight, and two drill stem tests of the J-sand recovered small amounts of mud with no shows of oil/gas and no water. It is our intent to plug and abandon the well setting plugs as follows:

<u>Cement</u>	<u>Depth</u>
650' up	40 sx
1560' up	75 sx (across Fox Hills sand 1418-1516)
Threaded cap being installed on top of surface casing*	

* Mr. Major Qualls (surface and mineral owner) will complete as water supply well from shallow Tertiary sands. Please see attachments.

DVR	<input checked="" type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HMM	<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 Robert M. Wakefield TITLE Geologist DATE 9-1-71

(This space for Federal or State office use)

APPROVED BY D.V. Rogers TITLE DIRECTOR DATE SEP 2 1971

CONDITIONS OF APPROVAL, IF ANY: gpp

7