

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

RECEIVED

DEC 18 1973

File in duplicate for Patented and Federal lands;
File in triplicate for State lands.

OIL & GAS CONS.

WELL DESIGNATION AND SERIAL NO.

C-11502

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 GAS WELL OTHER Plug and Abandon

2. NAME OF OPERATOR
Cities Service Oil Company

3. ADDRESS OF OPERATOR
1600 Broadway, Suite 900, Denver, Colorado

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface 760' FNL & 1990' FEL - Sec. 34-T9N-R80W
At proposed prod. zone Same

14. PERMIT NO. 73-768

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
8125 Gr

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
None

7. UNIT AGREEMENT NAME
None

8. FARM OR LEASE NAME
Federal "B"

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 34-T9N-R80W

12. COUNTY Jackson

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 checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	(Other) _____

(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 12-14-73

TD 8884' - 8 5/8" Csg. @ 1090' - 730 Sks Cement - Cement Returns.
P & A - Go in hole open ended.

- Plug No. 1 - 8700' - 8500' - 70 Sks Cement.
- Plug No. 2 - 8150' - 8050' - 55 Sks Cement.
- Plug No. 3 - 3600' - 3500' - 35 Sks Cement.
- Plug No. 4 - 1150' - 1050' - 50 Sks Cement.

Mud between plugs.

Cut off 8 5/8" - 2' below ground level - 12 sks cement in top of cut off casing.
Cement 4 1/2" DP - 10' long, as marker in top of cut off 8 5/8" - 4' of DP to be above ground level.

Erect Dry Hole Marker as prescribed by law. Restore location.

DVR	<input checked="" type="checkbox"/>
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 Assistant Region Manager DATE 12-14-73

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE DEC 19 1973



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