



00221129

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

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

COLO.

RECEIVED

DEC 28 1970

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		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR Tom Vessels		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 285 Milwaukee Street, Denver, Colorado 80206		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 <u>C-SENE Section 32-T7N-R64W; 1980FNL & 660FEL</u> At proposed prod. zone		8. FARM OR LEASE NAME McCrory
14. PERMIT NO. 70-145		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4826KB 4815GL		10. FIELD AND POOL, OR WILDCAT Wildcat
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 32-T7N-R64W
		12. COUNTY Weld
		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"/>	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"/>	

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 type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

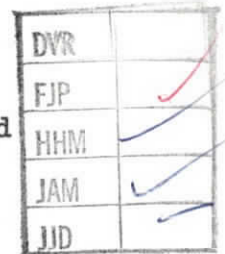
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Date of work January 30, 1971

We attempted to make a commercial gas producer but due to the inexhaustible amount of water we fail to complete same as a gas producer. We desire to plug and abandon this well using the following procedure:

1. Fill with sand from TD inside casing (7670) across casing perforations (7580-7595) to a height of 7570 and cap with 10 sacks of cement
2. Shoot off 4 1/2" OD casing and pull with hole mud laden
3. Place 15 sacks of cement in bottom of surface casing @ 100'
4. Place 10 sacks of cement in top of surface casing.

CONDITION OF APPROVAL: Provided that the Fox Hills formation is plugged off to protect water zones. (to 500)



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

SIGNED

TITLE Operator-AgentDATE 12-23-70

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

DIRECTOR
 O & G CONS. COMMISSION

DEC 30 1970