

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

01656421

RECEIVED

FEB 21 1986

File in duplicate for Patented and Federal lands.
File in triplicate for 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 <input type="checkbox"/> GAS <input checked="" type="checkbox"/> WELL <input type="checkbox"/> WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR Diversified Resources Limited		6. IF INDIAN LAND, STATE OF INDIANA, SERIAL NO.	
3. ADDRESS OF OPERATOR 1600 Stout Street, Suite 1500, Denver, Colorado 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 1980' FNL & 500' FWL (SW NW) At proposed prod. zone Same		8. FARM OR LEASE NAME Lewis, N.P.	
14. PERMIT NO. 85-869		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4760' GR		10. FIELD AND POOL, OR WILDCAT New Raymer	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 12 T7N R58W	
		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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON

CHANGE PLANS

Temporarily abandon

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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.)

18. Date of work

* Must be accompanied by a cement verification report.

Attached please find a recap of activities on the above referenced well.

This well was temporarily abandoned as on November 11, 1985. A Sundry will follow with permanent plugging when activities occur.

WRS	
FJP	
WRS	
WRS	
WRS	
WRS	
WRS	
WRS	
WRS	
WRS	

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

SIGNED

T.J. Cammon

TITLE Manager of Operations

DATE 2-18-86

(This space for Federal or State office use)

APPROVED BY

William Smith

TITLE

DIRECTOR

O & G Cons. Comm.

DATE

FEB 26 1986

CONDITIONS OF APPROVAL, IF ANY:

Prior approval should be obtained before plugging