

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

RECEIVED



APR 2 1982

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

5. LEASE DESIGNATION & SERIAL NO.
U.S. C-15678

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.)

COLORADO OIL & GAS CONSERVATION COMMISSION

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME None
2. NAME OF OPERATOR H.C. Petersen	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR 2607 Sidney St. Bellevue Ne. 68005	9. WELL NO. 1 - Federal
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 720ft from So. Line 650ft from West Line SW SW Sec 20, T. 24 S., R 54 West.	10. FIELD AND POOL, OR WILDCAT Wildcat
14. PERMIT NO. 82-358	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 20-24S-54W
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4363.5 GL	12. COUNTY Otero
	13. STATE Co.

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS: <input type="checkbox"/>
(Other) <input type="checkbox"/>	

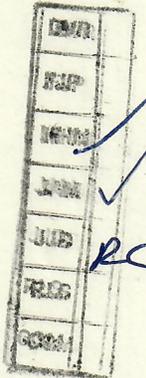
WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>Status</u>	

(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.)

18. Date of work March 31st & April 1st 1982 * Must be accompanied by a cement verification report.

Set 33 ft of 10 3/4 Conductor pipe.
5" top soil 10 ft hard lime
8 feet broken lime
14 feet fragile lime Tempest Formations
Waiting on rig to complet well.



19. I hereby certify that the foregoing is true and correct
SIGNED H.C. Petersen TITLE _____ DATE 4/2/78

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR O & G Cons. Comm. DATE APR 14 1982

BEST IMAGE AVAILABLE

Handwritten mark