



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

RECEIVED  
JAN 31 1972

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 WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>   |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>Shell Lease                     |
| 2. NAME OF OPERATOR<br>Investors Drilling Ventures, Inc.   |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                   |
| 3. ADDRESS OF OPERATOR<br>P.O. Box 74 LeSueur, Minnesota 56058   |  | 7. UNIT AGREEMENT NAME   |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface Shell Divide Unit # 6<br>At proposed prod. zone NE NE Section 3-T8N-R53W, Divide Field,<br>Logan County, Colorado |  | 8. FARM OR LEASE NAME  |
| 14. PERMIT NO.   | 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>GR | 9. WELL NO.<br># 6 WI  |
|  |  | 10. FIELD AND POOL, OR WILDCAT<br>Divide Field                         |
|  |  | 11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA<br>Section 3-T8N-R53W |
|  |  | 12. COUNTY<br>Logan  |
|  |  | 13. STATE<br>Colorado  |

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 checked="" 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.)

May 8, 1971

Date of work \_\_\_\_\_

- Placed gravel above perforations
- Placed 5 bags cement on top of gravel.
- Filled remainder of hole with heavy mud laden fluid.
- Placed 15 bags cement plug in and out of bottom of surface casing.
- Placed 10 bags cement plug in top and over surface pipe.

|     |   |
|-----|---|
| DWR |   |
| F/P | ✓ |
| H/M | ✓ |
| JAN | ✓ |
| J/D | ✓ |

Ex WI

Gene T. Bomar  
705 Jefferson  
Kimball, Nebraska 69145

18. I hereby certify that the foregoing is true and correct  
SIGNED Gene T. Bomar TITLE Purchasing agent DATE November 8, 1971

(This space for Federal or State office use)

APPROVED BY [Signature]  
CONDITIONS OF APPROVAL, IF ANY:

DIRECTOR  
O & G CONS. COMM.  
DATE FEB 3 1972