



UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

0-21690 Colorado

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Ballinger-Federal

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

South McCallum

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Section 17-9N-70W

12. COUNTY OR PARISH 13. STATE

Jackson Colorado

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

2. NAME OF OPERATOR
Gulf Oil Corporation

3. ADDRESS OF OPERATOR
P. O. Box 1971, Casper, Wyoming

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

2027° SNL, 738° WEL, SE NE, 17-9N-70W

14. PERMIT NO.

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

8148° Ground

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 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 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.)*

Sand to 5200°, 10 sacks cement plug on top of sand plug. Shot off pipe at 3774°. Pumped 25 sacks cement plug on stub of 7 inch. Dispensed with mud laden fluid. Bridged hole at 327°. Dumped 25 sacks cement plug on bridge. 10 sacks cement in top of surface. Dry hole marker set. Mud laden fluid between plugs.

Work completed 9-3-64.

P. suggested OK with

EX Oil Prod

| | |
|------|-------------------------------------|
| DVR | |
| WRS | |
| HHM | |
| JAM | |
| FJP | <input checked="" type="checkbox"/> |
| JJD | <input checked="" type="checkbox"/> |
| FILE | |

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

SIGNED J. D. MACKAY

TITLE Area Engineer

DATE 10-13-64

(This space for Federal or State office use)

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

TITLE Director
COLO. OIL & GAS COMM.

DATE OCT 16 1964

cc: Colorado O&G Cons. Comm. (2)
Hull Casing Pulling Company (1)

*See Instructions on Reverse Side

