



**STATE OF COLORADO**  
**OIL AND GAS CONSERVATION COMMISSION**  
DEPARTMENT OF NATURAL RESOURCES  
SUBMIT ORIGINAL AND 1 COPY

DEC 30 1996

FOR OFFICE USE

ET	FE	UC	SE
----	----	----	----

**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 type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input checked="" type="checkbox"/> OTHER <b>Completion Procedure</b>	6. PERMIT NO.
2. NAME OF OPERATOR <b>VESSELS OIL &amp; GAS COMPANY</b>	7. API NO.
3. ADDRESS OF OPERATOR <b>1050 - 17TH STREET, SUITE #2000</b>	8. WELL NAME <b>VESSELS MINERALS</b>
CITY <b>DENVER</b> STATE <b>CO</b> ZIP CODE <b>80265</b>	9. WELL NUMBER <b>#30-5</b>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 14 below.) At surface <b>1143' FNL &amp; 1581' FWL</b> At proposed production zone <b>2177' FNL &amp; 824' FWL</b>	10. FIELD OR WILDCAT <b>WATTENBERG</b>
12. COUNTY <b>WELD</b>	11. QTR. QTR. SEC., T.R. AND MERIDIAN <b>NE NW SEC 30-T1N-R68W (Surface)</b> <b>SW NW SEC 30-T1N-R68W (BHL)</b>

**13A. NOTICE OF INTENTION TO:**

- ☐ PLUG AND ABANDON  
☒ MULTIPLE COMPLETION  
☒ COMMINGLE ZONES  
☐ FRACTURE TREAT  
☐ REPAIR WELL  
☐ OTHER:

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

**13B. SUBSEQUENT REPORT OF:**

- ☐ FINAL PLUG AND ABANDONMENT  
SUBMIT 3RD PARTY CEMENT VERIFICATION  
AND JOB LOG)  
☐ ABANDONED LOCATION (WELL NEVER DRILLED -  
SITE MUST BE RESTORED WITHIN 6 MONTHS)  
☐ REPAIRED WELL  
☐ OTHER:

\*Use Form 5 - Well Completion or Recompletion Report and Log for  
subsequent report of Multiple/Commingled Completions and Recompletions.

**13C. NOTIFICATION OF:**

- ☐ SHUT-IN/TEMPORARILY ABANDONED  
DATE:  
(REQUIRED EVERY 6 MONTHS)  
☐ PRODUCTION RESUMED  
DATE:  
☐ LOCATION CHANGE (SUBMIT NEW PLAT)  
☐ WELL NAME CHANGE  
☐ OTHER:

14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (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).

**15. DATE OF WORK**

Vessels Minerals #30-5 completion procedure will be as follows:

1. Perforate JSND and frac w/500,000 # 20/40 sand.
2. Run tubing and produce JSND for one year.
3. Set CIBP over JSND.
4. Perforate NB-CD and frac together w/400,000 # 20/40 sand.
5. Flow well back. Drill CIBP and commingle JSND and NB-CD together.
6. Produce both zones up 2-3/8" tubing.

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

SIGNED

PHONE NO.

303-825-3500

NAME (PRINT)

DAWN H. DARLING

TITLE PRODUCTION ENGINEER

DATE 12/30/96

(This space for Federal or State office use)

APPROVED

TITLE SR. PETROLEUM ENGINEER  
O & G Cons. Comm.

DATE

DEC 31 1996

CONDITIONS OF APPROVAL, IF ANY: