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

SUBMIT ORIGINAL AND 1 COPY

RECEIVED

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COLO.OIL & GAS CONS.COM

FOR OFFICE USE ONLY

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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"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. FEDERAL/INDIAN OR STATE LEASE NO.
2. NAME OF OPERATOR Three State Well/ Timka resources, Ltd.		6. PERMIT NO. 741100
3. ADDRESS OF OPERATOR 1520 E. Mulberry, Suite 240		7. API NO. 001069620
CITY Fort Collins, CO	STATE CO	8. WELL NAME Claycomb A-1
ZIP CODE 80524		9. WELL NUMBER A-1 #00025
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NENE-Sec 2, T3S, R61 W		10. FIELD OR WILDCAT Big Bend
At proposed prod. zone		11. QTR. QTR. SEC. T.R. AND MERIDIAN NENE Sec2, T3S, R61W
12. COUNTY Adams County		

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

13A. NOTICE OF INTENTION TO:

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

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 3 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingle 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)

15. DATE OF WORK September 28, 1991

Verbal- Steve Pott- September 23, 1991

Spot 30 Sacks accross D & J perforations (6630-6636) (6560-6576)

8 5/8 - 188'

35 Sacks 1/2 in & 1/2 out

10 sacks at top

Cut casing 4' below surface and weld Plate

EXHAUSTED
OIL WELL

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

SIGNED

TELEPHONE NO. 224-5869

NAME (PRINT)

Timothy Pivonka

TITLE

Pres./Timka Resources

DATE

Oct.12, 1991

(This space for Federal or State office use)

APPROVED

TITLE

S. Engr.

DATE

11/15/91

CONDITIONS OF APPROVAL, IF ANY: