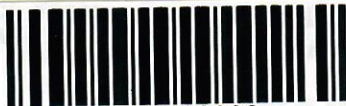


STATE OF COLORADO
CONSERVATION COMMISSION
DEPT OF NATURAL RESOURCES

07509054

RECEIVED



99999999

ate for Patented and Federal lands.
ate for State lands.

5. LEASE DESIGNATION & SERIAL NO.

AUG 7 1984

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry Hole		5. LEASE DESIGNATION & SERIAL NO. AUG 7 1984	
2. NAME OF OPERATOR Oxoco, Inc. & Gear Drilling Company		6. IF INDIAN ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 470 Denver Club Bldg., Denver, CO 80202		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1920' FNL & 600' FEL of NE/4 At proposed prod. zone same as above		8. FARM OR LEASE NAME Peavy Channel	
14. PERMIT NO. 84753		9. WELL NO. 29-1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4634 GR		10. FIELD AND POOL, OR WILDCAT Peavy 'J' Sand	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 29-12N-55W	
		12. COUNTY Logan	
		13. STATE Colorado	

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 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.)

18. Date of work July 15th, 1984 * Must be accompanied by a cement verification report.

After setting surface casing, well was drilled to a total depth of 6250' and electric logs run. One (1) Drill Stem Test was run from 5920' to 5940'. Since there was no significant show of oil or gas, well was plugged and abandoned as follows:

15 sack cement plug from 155' to 185'
10 sack cement plug from surface to 30 feet.
15 sack cement plug from 6200' to 6250'

Hole was filled with heavy mud and a steel cap was welded on casing as ordered by a Commission Representative on July 15th, 1984.

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

SIGNED

GEORGE L. GEAR

TITLE

President

DATE

8/1/84

(This space for Federal or State office use)

APPROVED BY

William Smith

TITLE

DIRECTOR

O & G Cons. Comm.

DATE

AUG 30 1984

CONDITIONS OF APPROVAL, IF ANY:

cc: Harold Hollis
Kevin Fowler



00290928