

APR 5 1985

STATE OF COLORADO  
OIL AND GAS CONSERVATION ( )  
DEPARTMENT OF NATURAL RESOURCES  
00401205

File in duplicate for Patented and Federal lands.  
File in triplicate for State lands.

5. LEASE DESIGNATION & SERIAL NO.  
**COLO. OIL & GAS CONS. Comm.**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Gillette

9. WELL NO.  
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10. FIELD AND POOL, OR WILDCAT  
Roman Nose, North

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 23, T3S, R58W

**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  Dry Hole

2. NAME OF OPERATOR  
National Cooperative Refinery Association

3. ADDRESS OF OPERATOR  
300 Country Club Road, #201, Casper, WY 82609

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface  
At proposed prod. zone 1980' FNL, 600' FWL, SW/NW Sec. 23

14. PERMIT NO.  
841441

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
4898 GR

12. COUNTY  
Adams

13. STATE  
Colo.

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"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Final Clean Up</u>	

(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 March 28, 1985 \* Must be accompanied by a cement verification report.

Pits have been backfilled, and the location is ready for resumption of normal farming operations.

Vert	
HP	
HW	
FL	
LP	
CP	
ED	

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

SIGNED W.O. Sparks TITLE District Superintendent DATE April 2, 1985

(This space for Federal or State office use)

APPROVED BY William Smith TITLE DIRECTOR DATE APR 22 1985  
O & G Cons. Comm.

CONDITIONS OF APPROVAL, IF ANY:

*Subject to inspection by OGCC Engineers*

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