

STATE OF COLORADO
OIL AND GAS CONSERVATION
DEPARTMENT OF NATURAL RESOURCES



RECEIVED
APR 5 1985

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

5. LEASE DESIGNATION & SERIAL NO. GOLD OIL & GAS CONS.	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Gillette	
9. WELL NO. 1	
10. FIELD AND POOL, OR WILDCAT Roman Nose, North	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23, T3S, R58W	
12. COUNTY Adams	13. STATE Colo.

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 1980' FNL, 600' FWL, SW/NW Sec. 23
At proposed prod. zone

14. PERMIT NO. 841441	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4898 GR
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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) <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.

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
CONDITIONS OF APPROVAL, IF ANY: O & G Cons. Comm.

Subject to inspection by OGCC Engineers

VERIFIED	
EXP	
REC	
FILED	
INDEXED	
SEARCHED	
SERIALIZED	
FILED	