



UNITED STATES
OF THE INTERIOR
WATER RESOURCES
DIVISION
WELL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

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.)

JUN 17 1966

1. OIL WELL GAS WELL OTHER **Water Disposal**

2. NAME OF OPERATOR
Chevron Oil Company, Western Division

3. ADDRESS OF OPERATOR
P. O. Box 220, Casper, Wyoming 82602

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1957 S/N, 1974' E/W (SE 1/4)

5. LEASE DESIGNATION AND SERIAL NO.
Fee

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Pierce

8. FARM OR LEASE NAME
Gertrude L. King

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
Pierce-Lyons

11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA
Sec. 22, T8N, R60W

12. COUNTY OR PARISH **Weld** 13. STATE **Colorado**

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
5062 KB

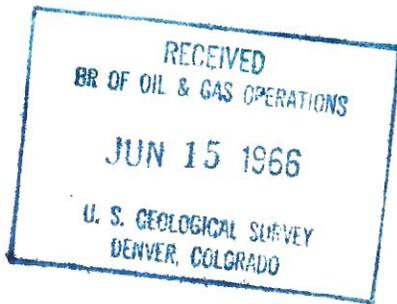
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input checked="" type="checkbox"/> Convert to Water Injector		(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.)*

The following well work is planned:

1. Drill out cement 9225-9240 and C I Bridge Plug at 9240, clean out to PHD.
2. Perforate interval 9272-9276 and 9290-9300.
3. Set Packer on Tubing at 9200'.
4. Run injectivity test.
5. Place well on injection.



DVR	<input checked="" type="checkbox"/>
WRS	<input type="checkbox"/>
HHM	<input type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
JJD	<input type="checkbox"/>
FILE	<input type="checkbox"/>

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

SIGNED P. F. Hamilton TITLE P. F. Hamilton Lead Drilling Engineer DATE June 9, 1966

(This space for Federal or State office use)

APPROVED BY (Orig. sig.) E. R. HAYMAKER TITLE District Engineer DATE 6/15/66

CONDITIONS OF APPROVAL, IF ANY: