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FORM 4
REV. 7-64

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

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

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"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR <u>Inexco Oil Company</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <u>308 Lincoln Tower Bldg., Denver, CO 80295</u>		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 <u>NE NE Section 9, T19S, R45W</u> <u>660' S of N Line</u> <u>660' W of E Line</u> At proposed prod. zone		8. FARM OR LEASE NAME <u>Harrison</u>
14. PERMIT NO. <u>66310</u>	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>3910' KB 3902' GL</u>	9. WELL NO. <u>#2</u>
		10. FIELD AND POOL, OR WILDCAT <u>Brandon</u>
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>NE NE, Section 9</u> <u>T19S, R45W</u>
		12. COUNTY <u>Kiowa</u>
		13. STATE <u>Colorado</u>

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 checked="" 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"/>	

(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.)

Date of work July 5, 1977 to July 23, 1977

MI and Ru Pulling Unit. POOH w/Production Equipment.
RIH w/tubing and packer. Set packer at 4445' and squeezed perfs from 4559'-4806' with 250 sx. Type H Cement.

Drilled out cement. Discovered casing leak from 1250' to 1850'
Successfully squeezed casing leak with 120 sx. Type H Cement. Resqueezed lower set of perfs. Took 10 sx. cement and pressured up. Reversed out excess cement and drilled cement to 4762'. Perforated 4736'-44, 4559-64', 4572'-83' 4596'-99', 4606-10', 4624-27', and acidized. RIH w/Production Equipment. Put well on pump.

Production Before Workover - 32 BOPD 3,168 BWPD
Production After Workover - 49 BOPD 491 BWPD

- DVR
- FJP
- HHM
- JAM
- JJD
- RLS
- CGM

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

SIGNED W.R. Emmett TITLE Division Production Manager DATE July 27, 1977
W. R. Emmett
 (This space for Federal or State office use)

APPROVED BY D.V. Rogers TITLE _____ DATE AUG 5 1977
 CONDITIONS OF APPROVAL, IF ANY: _____

X