

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"/> 2. NAME OF OPERATOR Inexco Oil Company 3. ADDRESS OF OPERATOR 308 Lincoln Tower Building Denver, Colorado 80203 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface C SW NE Section 10-Township 19 South-Range 45 West At proposed prod. zone 1980' South of North Line 1980' West of East Line 14. PERMIT NO. 67 164		5. LEASE DESIGNATION AND SERIAL NO. Colorado 00572461 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME USA Butler 9. WELL NO. #1 10. FIELD AND POOL, OR WILDCAT Brandon 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 10 T-19-S, R-45-W 12. COUNTY Kiowa 13. STATE Colorado
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3929' GR		

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 type="checkbox"/>
(Other) <input type="checkbox"/>	Recompletion <input checked="" type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recombination 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 _____

Moved in and rigged up pulling unit. Pulled out of hole with production equipment. Ran 5 1/2" wireline bridge plug and set at 4450'. Set cement retainer at 3895'. Pressured on annulus, would not hold. Pulled out of hole with tubing checked for leak. Found hole in 64th joint. Ran tubing and latched into retainer. Pressured to 500 psi on annulus, held ok. Mixed 150 sx common cement. Squeezed at 600 psi with 120 sx in formation. Ran cement bond log, top of cement at 3630'. Perforated 3878'-3886' with 2 JSPF. Ran in hole with tubing and Model "R" packer. Swabbed tested. Acidized with 500 gals 15% MCA. Rigged up swab and began swabbing. Ran 2" pump and rods. Moved in and connected pumping unit. Placed well on production.

Production before workover - 0 BO, 0 BW
 Production after workover - 216 BO, 96 BW

DVR	EJP	HHM	JAM	JJD	GCH	CGM

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

SIGNED

W. R. Emmett
 W. R. Emmett

TITLE Area Production Supt.

DATE 1/30/75

(This space for Federal or State office use)

APPROVED BY

D. V. Rogers
 D. V. Rogers

TITLE

DIRECTOR

DATE

FEB 4 1975

CONDITIONS OF APPROVAL, IF ANY:

X