

9-331
1973

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UNITED STATES SEP 4 1979
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
COLO. OIL & GAS CONS. COMM.



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 Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR
Inexco Oil Company

3. ADDRESS OF OPERATOR 80295
308 Lincoln Tower, 1860 Lincoln Twr., Denver, CO

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☐
☐
☒
☐
☐
☐
☐
☐
☐

BEST IMAGE AVAILABLE

5. LEASE

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
CA NW 190

8. FARM OR LEASE NAME
U.S.A. Butler

9. WELL NO.
2

10. FIELD OR WILDCAT NAME
Brandon

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
NW $\frac{1}{4}$ NE $\frac{1}{4}$, Section 10
T19S, R45W

12. COUNTY OR PARISH
Kiowa

13. STATE
Colorado

14. API NO.
05 061 6140

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3917' GR, 3926' KB

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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: August 1979

The purpose of this workover was to acidize the Mississippian formation. The perms, 4673'-4763', were acidized with 9,000 gallons of MOD 202 acid, and the well was put back on production.

Production before workover: 19 BOPD, 168 BWPD.
Production after workover: 33 BOPD, 240 BWPD.

Subsurface Safety Valve: Manu. and Type

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

SIGNED W.R. Emmett TITLE Divi. Drlg/Prod Mgr DATE August 28, 1979

(This space for Federal or State office use)

APPROVED BY W.R. Emmett
CONDITIONS OF APPROVAL, IF ANY:

TITLE DIRECTOR DATE SEP 5 1979

*See Instructions on Reverse Side

DVR	<input checked="" type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HMM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
RLS	<input checked="" type="checkbox"/>
CGM	<input checked="" type="checkbox"/>