

# OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

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

RECEIVED

OCT 17 1967



COLO. OIL & GAS CONS. COMM. Fee

## 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry Hole	
2. NAME OF OPERATOR Plains Exploration Company	
3. ADDRESS OF OPERATOR 1135 Petroleum Club Building, Denver	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' S of N and 660' W of E Line (NE $\frac{1}{4}$ NE $\frac{1}{4}$ ) At proposed prod. zone	
14. PERMIT NO. 66 383	15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 3906.6'

5. LEASE DESIGNATION AND SERIAL NO.	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Chivington Grazing Ass'n	
9. WELL NO. 1	
10. FIELD AND POOL, OR WILDCAT Brandon-Mississippian	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 4, T19S, R45W, 6th P.M.	
12. COUNTY OR PARISH Kiowa	13. STATE Colorado

### 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 checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

#### 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) September 21, 1967 (and date)			

(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.)

In an attempt to re-enter, upon reaching base of the surface pipe we could not gain entrance into this old hole. Drilled to 940' new hole and repeated efforts to get into the old hole, was unable to do so. Had heavy mud run to base of surface, put 15 sacks cement plug at base of surface pipe heavy mud then 10 sacks at top. Surface casing 3' below ground level.

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

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

SIGNED

Robert E. Johnson

TITLE Vice President

DATE October 16, 1967

(This space for Federal or State office use)

APPROVED BY

TITLE Director

DATE OCT 19 1967

CONDITIONS OF APPROVAL, IF ANY:

after entry