

STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION

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99999999

RESOURCES

Federal lands.

COLO. OIL & GAS CONS. COMM.

5. LEASE DESIGNATION & SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

State of Colorado "B"

9. WELL NO.

#7

10. FIELD AND POOL, OR WILDCAT

Big Beaver

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec16-T3S-R56W

1. OIL ☒ GAS ☐
WELL WELL OTHER

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P.O. Box 39200 - Denver, Colorado 80239

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below.)

At surface

SWSW/4 Sec. 16-T3s-R56W

At proposed prod. zone

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4695 RT

12. COUNTY

Washington

13. STATE

Colorado

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐
☐

PULL OR ALTER CASING

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☐
☐
☐

MULTIPLE COMPLETE

ABANDON

CHANGE PLANS:

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL,

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
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☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

☐
☐
☒
☐(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.)

18. Date of work October 6, 1981

* Must be accompanied by a cement verification report.

Move in casing puller

Plug #1: 5132-4400' x 100 sxs cement

Plug #2: 265-160' x 70 sxs cement

Plug #3: Surface x 10 sxs cement

Cut casing 5' below surface and cap

Restored location to original contours

Verbal approval to PxA subject well received from Jim McKee to Bob Anderson
on 8/31/81 at 2:00 PMEXHAUSTED
OIL WELL

121-05963

WRS	
FJP	
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
RCC	<input checked="" type="checkbox"/>
LAR	
CGM	
ED	



00837657

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

SIGNED

L.R. West

SD7

DISTRICT ADMINISTRATIVE SUPERVISOR

TITLE

DATE 11/11/83

(This space for Federal or State office use)

APPROVED BY

William R. Smith

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DIRECTOR

O & G Cons. Comm.

DATE DEC 20 1983

RECEIVED

NOV 1 9 1983

COLD OIL & GAS CORP. COMM.

To Jim
Date 8/1 Time 10:02

WHILE YOU WERE OUT

Name Mr. Rogers *Dist. Foreman*
of Amoco
Phone 371-2480

Telephoned	<input checked="" type="checkbox"/>	Please Call	<input type="checkbox"/>
Called To See You	<input type="checkbox"/>	Will Call Again	<input type="checkbox"/>
Wants To See You	<input type="checkbox"/>	RUSH	<input type="checkbox"/>

Message Returned
your call.
Called B.D. + Rogers
on 9-1-81

me
OPERATOR

6-CS
FORM 1-69 395-51-06-0013

11-1-81