

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.



00241774

RECEIVED

AUG 8 1973

COLORADO OIL & GAS CONSERVATION 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 "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|---|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. |
| 2. NAME OF OPERATOR Frank H. Walsh | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR Box 30, Sterling, Colorado 80751 | | 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 C SE SW Section 27-9N-56W | | 8. FARM OR LEASE NAME John Craig Dunning |
| At proposed prod. zone | | 9. WELL NO. #1 |
| 14. PERMIT NO. | | 10. FIELD AND POOL, OR WILDCAT Tapadero |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4464 KB | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 27-9N-56W |
| | | 12. COUNTY Weld |
| | | 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 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 checked="" 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 25, 1973

Set cement plug, 5 sacks across perforations, 5640-45'.

Set 10 sack plug at base of surface pipe and 10 sack plug at surface of the hole.

| | |
|-----|--|
| DVR | |
| FIP | |
| HHM | |
| JAM | |
| JJD | |

Ex Oil Prod.

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

SIGNED Frank H. Walsh

TITLE Operator

DATE August 3, 1973

(This space for Federal or State office use)

APPROVED BY W. Rogers
CONDITIONS OF APPROVAL, IF ANY:

TITLE DIRECTOR
D. H. G. CON. COMM.

DATE AUG 13 1973