

STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

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COLO. OIL & GAS CON. COMM.



00054178

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.)

5. LEASE DESIGNATION & SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

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

NESE 6 T2N, R53W

12. COUNTY

13. STATE

Washington

Colorado

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Kenneth L. Tipps

3. ADDRESS OF OPERATOR
1720 S. Bellaire #410, Denver, Co. 80222

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

At proposed prod. zone
Test "J" & "D" Sands

14. PERMIT NO.
82-127

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4520 KB

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF PULL OR ALTER CASING
FRACTURE TREAT MULTIPLE COMPLETE
SHOOT OR ACIDIZE ABANDON
REPAIR WELL CHANGE PLANS:
(Other)

WATER SHUT-OFF REPAIRING WELL
FRACTURE TREATMENT ALTERING CASING
SHOOTING OR ACIDIZING ABANDONMENT*
(Other) WASH DOWN - TEST - P/A
(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 August 12, 1982

* Must be accompanied by a cement verification report.

See attached plugging report.

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

SIGNED Kenneth L. Tipps

TITLE Operator

DATE 10/12/84

(This space for Federal or State office use)

APPROVED BY William R. Smith

TITLE DIRECTOR

DATE OCT 29 1984

CONDITIONS OF APPROVAL, IF ANY:

O & G Cons. Comm.

NOV 2 1984

Vertical stamp with checkmarks

