

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

SUBMIT ORIGINAL AND 1 COPY



FOR OFFICE USE ONLY			
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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 FEDERAL, INDIAN OR STATE LEASE NO.

NA

OIL WELL GAS WELL COALBED METHANE INJECTION WELL OTHER

6 PERMIT NO
92-337

2 NAME OF OPERATOR
Western Production Company

RECEIVED
DEC 19 1994

7 API NO
05-123-15684

3 ADDRESS OF OPERATOR
923 Grieves Rd.

8 WELL NAME
LaPoudre #4

CITY STATE ZIP CODE
Newcastle, Wyoming 82701

COLO. OIL & GAS CONS. COMM.

9 WELL NUMBER
#4

4 LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
664' FSL & 2199 FWL ✓

10 FIELD OR WILDCAT
La Poudre South

At proposed prod zone

12 COUNTY
Weld

11 QTR QTR. SEC., T.R. AND MERIDIAN
SESW Sec. 31, T6N, R66W

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

13A. NOTICE OF INTENTION TO:

- PLUG AND ABANDON
- MULTIPLE COMPLETION
- COMMINGLE ZONES
- FRACTURE TREAT
- REPAIR WELL
- OTHER _____

13B. SUBSEQUENT REPORT OF:

- FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)
- ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS)
- REPAIRED WELL
- OTHER Acid Job

* Use Form 5 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingled Completions and Recompletions

13C. NOTIFICATION OF:

- SHUT-IN TEMPORARILY ABANDONED (DATE _____) (REQUIRED EVERY 6 MONTHS)
- PRODUCTION RESUMED (DATE 11/15/94)
- LOCATION CHANGE (SUBMIT NEW PLAT)
- WELL NAME CHANGE
- OTHER _____

14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (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)

15. DATE OF WORK 11-12-94

Please See Attached

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

SIGNED Bonnie Cook

TELEPHONE NO. 307-746-3517

NAME (PRINT) Bonnie Cook TITLE Lease Analyst

DATE 12-12-94

(This space for Federal or State office use)

APPROVED _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE 1/4/95



LaPoudre South #4, SESW Sec 31 T6N R66W Weld County, Colorado was acidized and returned to production commencing 11-10-94 as follows:

MIRUSU. Hot oil tbg and rods. Pull rods & pump. Pull tbg looking for hole but found none. Reran tbg and set anchor. Swabbed well. Acidized with 1000 gal 7-1/2% HCL. Max pressure 1800 psi @ 2 BPM. No real break. Surged acid and pressure down to 1350 psi max. ISIP = 1250psi. 15 min. SIP = 850 psi. Shut well in over weekend. SIP = -0- after 40 hrs shut-in. Anchor was unseated. Tried to reset but wouldn't. Pull tbg and replace anchor. Run tbg. Swab well. Run pump & rods. Place on production 11-15-94. RDMOSU.

Production Before: -0- BOPD. Shut-in for 17 months - uneconomical to repair.
Production After: 9 BOPD