

OIL AND GAS
DEPARTMENT
OF THE STATE OF COLORADO

99999999

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

APL# 075-08252 RECEIVED

JAN 8 1971

COLO. OIL & GAS CONS. 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. | |
| 2. NAME OF OPERATOR Chapparral Drilling Company - Allison Drilling Company, Inc. | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| 3. ADDRESS OF OPERATOR 1275 Sherman Street, Denver, Colorado 80203 | | 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 1980' FWL At proposed prod. zone 1980' FSL | | 8. FARM OR LEASE NAME Mathewson | |
| 14. PERMIT NO. 70-670 | | 9. WELL NO. 1 | |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4339' Gr | | 10. FIELD AND POOL, OR WILDCAT Wildcat TOMAHAWK | |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA C NESW Sec. 11 9N 55W | |
| | | 12. COUNTY Logan | 13. STATE Colorado |

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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐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.)

Date of work 12-5-70 to 12-10-70

Drilled to TD Logged

Ran 1 DST No Show

P & A

15 sax cement Bottom of surface pipe

10 sax cement Top of surface pipe

| | |
|-----|-------------------------------------|
| DVR | <input checked="" type="checkbox"/> |
| FJP | <input checked="" type="checkbox"/> |
| HMM | <input checked="" type="checkbox"/> |
| JAM | <input checked="" type="checkbox"/> |
| LJD | <input checked="" type="checkbox"/> |

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

SIGNED

Guy W. Tucker

TITLE

Agent

DATE

1-8-71

(This space for Federal or State office use)

DIRECTOR

O & G CONS. COMM.

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

JAN 11 1971



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