

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.

RECEIVED

OCT 17 1973

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 DRY		5. LEASE DESIGNATION AND SERIAL NO. 2-849 6015 COMM.	
2. NAME OF OPERATOR APOLLO ENTERPRISES, INC.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 212 Farm Credit Building Omaha, Nebraska 68102		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 660' from N. line and 660' from W. line of the NW/4 At proposed prod. zone Same as above		8. FARM OR LEASE NAME State	
14. PERMIT NO. 73-809		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4339 GL 4345 KB		10. FIELD AND POOL, OR WILDCAT Wildcat Johnson Hill-East	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 21-8N-54W	
		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 <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 October 11, 1973

Filled hole with heavy drilling mud from 5380 to 91' Set 15 sacks of cement at 91' up and 10 sacks at top of surface casing down.
Surface casing was set at 91 feet.



DVR	
FIP	
HUM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
HO	<input checked="" type="checkbox"/>

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

SIGNED Bruce Whitaker

TITLE Agent

DATE 10-15-73

(This space for Federal or State only use)

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

TITLE

DIRECTION
OCC CONSERVATION

DATE OCT 19 1973