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STATE OF COLORADO  
OIL AND GAS CONSERVATION COMMISSION  
DEPARTMENT OF NATURAL RESOURCES  
Submit 1 copy

AUG 19 1996

FOR OFFICE USE			
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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)

<b>1</b> <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER			<b>5</b> FEDERAL INDIANS OR STATE LEASE NO
<b>2</b> NAME OF OPERATOR <b>APACHE CORPORATION</b>			<b>6</b> PERMIT NO C096-385
<b>3</b> ADDRESS OF OPERATOR <b>2000 POST OAK BLVD. SUITE 100</b>			<b>7</b> API NO 05-081-06899
<b>4</b> CITY <b>HOUSTON</b>	<b>STATE</b> <b>TEXAS</b>	<b>ZIP CODE</b> <b>77056-4400</b>	<b>8</b> WELL NAME SPETTERS
<b>5</b> LOCATION OF WELL (Report location clearly and in accordance with any State requirements See also space (7) below) At surface 600' FEL & 2000' FSL  At proposed prod zone SAME AS ABOVE			<b>9</b> WELL NUMBER #43-7
<b>12</b> COUNTY MOFFAT			<b>10</b> FIELD OR WILDCAT Craig North
			<b>11</b> QTR QTR SEC T R AND MERIDIAN NE SE Section 7-T8N-R90W

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

<b>13A</b> NOTICE OF INTENTION TO: <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> COMMINGLE ZONES <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> REPAIR WELL <input checked="" type="checkbox"/> OTHER SPUD	<b>13B</b> SUBSEQUENT REPORT OF: <input type="checkbox"/> FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG) <input type="checkbox"/> ABANDONED LOCATION (WELL NEVER DRILLED SITE MUST BE RESTORED WITHIN 6 MONTHS) <input type="checkbox"/> REPAIRED WELL <input type="checkbox"/> OTHER <small>USE FORM 5 Well Completion or Recompletion Report and Log for subsequent report of Multiple: Commingled Completions and Recompletions</small>	<b>13C</b> NOTIFICATION OF: <input type="checkbox"/> SHUT-IN TEMPORARILY ABANDONED (DATE _____) (REQUIRED EVERY 6 MONTHS) <input type="checkbox"/> PRODUCTION RESUMED (DATE _____) <input type="checkbox"/> LOCATION CHANGE SUBMIT NEW PLAT) <input type="checkbox"/> WELL NAME CHANGE <input type="checkbox"/> OTHER _____
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**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 06-07-96

APACHE CORPORATION SPUDDED THE 12-1/4" SURFACE HOLE ON 06-07-96. RAN 8-5/8", 24# K-55 SURFACE CASING AND SET AT 525' KB. CEMENTED WITH 260 SACKS OF CLASS B CEMENT. CIRCULATED TO SURFACE. BUMPED PLUG @2130 HRS ON 06-08-96, RELEASED PRESSURE, FLOAT HELD.

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

SIGNED

*Frances M. Byers*

TELEPHONE NO

(713) 296-6361

NAME (PRINT)

FRANCES M. BYERS

TITLE

SR. ENG. TECH

DATE

8-6-96

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY

TITLE

*RCP T*

DATE

*8-22-96*