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

COLO. OIL & GAS CONS. COMM.

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

5. LEASE DESIGNATION AND SERIAL NO.

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

BROOKS EXPLORATION INCORPORATED

3. ADDRESS OF OPERATOR

999 18th Street, Suite 3350, Denver, CO 80202

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

At surface 2100' FWL & 1960' FEL, Sec. 24, T6N, R67W

At proposed prod. zone as above

14. PERMIT NO.

811030

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

GR 4762'

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hettinger

9. WELL NO.

1-24

10. FIELD AND POOL, OR WILDCAT

La Poudre - Sussex

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

Sec. 24, T6N, R67W

12. COUNTY

Weld

13. STATE

Colorado

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐
☒

PULL OR ALTER CASING

☐
☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON

REPAIR WELL

CHANGE PLANS

(Other)

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 June 9 - 15, 1984

Pull rods and tubing. Repair pump. Look for tubing leaks.

WRS
REP
PH
LM
RCC
LAR
CGM
ED

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

SIGNED

TITLE

President

DATE

June 7, 1984

(This space for Federal or State office use)

APPROVED BY

TITLE

DIRECTOR

O & G Cons. Comm.

DATE

AUG 9 1984

CONDITIONS OF APPROVAL, IF ANY: