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OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES
OF THE STATE OF COLORADOFile in duplicate for Patented and Federal lands.
File in triplicate for State lands.RECEIVED
APR 28 1977
COLORADO OIL & GAS CONSERVATION COMMISSION

C

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

UPRR 43 Pan Am "I"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat Spindle

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

Sec. 14, T1N, R68W

12. COUNTY

Weld

13. STATE

Colorado

1. OIL WELL ☐ GAS WELL ☐ OTHER P&A

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P.O. Box 39200 - Denver, Colorado 80239

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

660 FSL 1980 FEL SW SE Sec. 14

At proposed prod. zone

14. PERMIT NO.

75108

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

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 perti-
nent to this work.)

Date of work 2-13-75

This well was plugged and abandoned as follows:

1. Set 60 SX Plug from 4750-4850
2. Set 50 SX Plug from 600-700
3. Set 10 SX Plug at top

Cut surface csg. off 5' below ground level and weld cap on top.

DVR	<input type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
QCM	<input type="checkbox"/>
CGM	<input type="checkbox"/>

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

SIGNED

TITLE Area Admin. Supervisor

DATE 4-25-77

(This space for Federal or State office use)

DIRECTOR

O & G CONS. COMM.

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

MAY 10 1977