



00054390

OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

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



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 Kingwood Oil Company | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 1470 First National Building, Oklahoma City, Oklahoma | | 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' S; 666' E of the NW Corner of NW 1/4 of NW 1/4 At proposed prod. zone | | 8. FARM OR LEASE NAME Xenia, West Unit |
| 14. PERMIT NO. No number | | 9. WELL NO. 3-7 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4464' K.B.; 4457' GR | | 10. FIELD AND POOL, OR WILDCAT Xenia, West, "J" Sand |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW NW Sec. 11-2N-54W |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Colorado |

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

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|--|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON <input checked="" type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input 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.)

It is proposed to fill 4 1/2" casing with cement to above top perforation at 4778'. Shoot and pull 4 1/2" casing, keeping hole full of heavy mud. Will spot cement plugs at bottom and top of 7" surface casing which is set at 179'. Approximate date of starting work is June 20, 1966.

| | |
|------|-------------------------------------|
| DVR | |
| WRS | |
| HHM | |
| JAM | |
| FJP | <input checked="" type="checkbox"/> |
| JJD | <input checked="" type="checkbox"/> |
| FILE | |

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

SIGNED Ben Spain TITLE Chief Clerk DATE 6-6-66

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE Director DATE JUN 14 1966

CONDITIONS OF APPROVAL, IF ANY:

