

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

MAY 20 1974



00238754

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> W.I. #47		5. LEASE DESIGNATION AND SERIAL NO. OIL & GAS CONS. COMM.	
2. NAME OF OPERATOR Rex Monahan		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 1231, Sterling, Colorado 80751		7. UNIT AGREEMENT NAME Mt. Hope	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface At proposed prod. zone NW NW SE Section 30-9N-53W		8. FARM OR LEASE NAME Green	
14. PERMIT NO.		9. WELL NO. W.I. #47 (formerly Shell Green #A-15)	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4169 DF		10. FIELD AND POOL, OR WILDCAT Mt. Hope	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30-9N-53W	
		12. COUNTY Logan	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"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

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 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 May 27, 1974

Plan to run sand from T. D. to 20 ft. above perforations and dump 5 sacks cement. Shoot off casing at approximately 4000 ft. and pull same. Run heavy mud to bottom of surface casing and set 15 sacks cement plug, mud to 28' and run 10 sacks cement to base of cellar. Cut off and weld on cap.

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

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

SIGNED Rex Monahan TITLE Operator DATE 5-17-74

(This space for Federal or State office use)

APPROVED BY McRogers TITLE DIRECTOR DATE MAY 21 1974
CONDITIONS OF APPROVAL, IF ANY:

X