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OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES
STATE OF COLORADOPermit for Patented and Federal lands.
Permit for State lands.5. LEASE DESIGNATION AND SERIAL NO.
COLO. OIL & GAS CONS. COMM.

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
QUALITY SUPPLY COMPANY

3. ADDRESS OF OPERATOR
6320 JACQUELINE WICHITA, KANSAS 67208

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface **SHELL DIVIDE UNIT #21 (FORMERLY BRITISH AMERICAN
REDEMAN #4) SEC. 34-T9N- R53W- SW-SW**
SW SW

14. PERMIT NO.

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

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT
DIVIDE

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

12. COUNTY
Logan

13. STATE
COLO

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 pertinent to this work.)

Date of work 5-28-71SAND TO COVER PERFORATIONS ~~XXXXXXXXXXXX~~ 5 SKS. CEMENT ON BOTTOM MUD TO ~~XXXXXXXXXXXX~~
BOTTOM OF SURFACE 15 SKS. CEMENT IN SURFACE MUD TO TOP 10 SKS. CEMENT ON TOP

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

Ex Oil Prod.

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

SIGNED *Jack Miller*TITLE **OWNER**DATE 5-28-71

(This space for Federal or State office use)

APPROVED BY *McRogers*
CONDITIONS OF APPROVAL, IF ANY:TITLE **DIRECTOR**
O & G CONS. COMM.DATE JUN 4 1971

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