

**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

SEP - 9 1970

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR GASCO, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 1600 Sherman St., Denver, Colorado 80203		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 2340' NSL & 1520' WEL of Section 11 At proposed prod. zone NW NE SW		8. FARM OR LEASE NAME Blevins	
14. PERMIT NO.		9. WELL NO. A-5	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 8028' G.L.		10. FIELD AND POOL, OR WILDCAT Canadian River	
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 11-T.9N., R.78W.	
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.)		12. COUNTY Jackson	
		13. STATE Colo.	

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 Sept. 4, 1970

Tests run from Aug. 31 thru Sept. 4, 1970 indicated the subject well capable of Gas rates of 336 MCF/day, oil rates of 6 bbls/day at a choke pressure of 315 psig on 18/64 inch choke.

Accordingly it has been decided to delay plugging back and re-perforating.

The well has been shut in pending installation; of production equipment to handle the oil. Such installation will be made in the spring or early summer of 1971.

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

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

SIGNED R. H. HigginsTITLE Agent/GASCO, Inc.DATE 9-7-70

(This space for Federal or State office use)

APPROVED BY Mr. RogersTITLE DIRECTORDATE SEP 11 1970

CONDITIONS OF APPROVAL, IF ANY:

file