

APR 25 '87 9:46

Formerly 9-331)

DEPARTMENT OF THE INTERIOR

(Other instructions on reverse side)

PAGE 013

EXPIRES AUGUST 31, 1985

BUREAU OF LAND MANAGEMENT

2. LEASE DESIGNATION AND SERIAL NO.

D-033804-B

3. IF INDIAN, ALLOTTEE OR TRIBE NAME

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

Twin Arrow, Inc.

(303) 675-8226

3. ADDRESS OF OPERATOR

P.O. Box 948 Rangely, Co. 81648

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

550' FWL, 2125' FSL, Sec. #11

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

G & M

9. WELL NO.

15 16A + 25A

10. FIELD AND POOL, OR WILDCAT

Rangely-Mancos

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

Sec. 11-T1N-R102W, 6th

14. PERMIT NO.

67-109

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

App. 5420' GR

12. COUNTY OR PARISH

Rio Blanco

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 PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Work Completed

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.)



00063695

Twin Arrow, Inc. has completed the work requested on Certified Mail No. P 241 038 934 dated Nov. 6, 1987.

RECEIVED
1987 NOV 17 A 10:27
BUREAU OF LAND MANAGEMENT
CRAB. CO. 81625-1129

NOV 30 1987

BY MP
DISTRICT OFFICE

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

SIGNED

Ernest Miller

TITLE Production Superintendent

DATE 11-10-87

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

FILE COPY

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Pencile