



00046783

OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES
OF THE STATE OF COLORADO

RECEIVED

MAY 20 1974

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

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <u>Dry Hole</u>		5. LEASE DESIGNATION AND SERIAL NO. <u>Denver 033804(b) 5</u>																				
2. NAME OF OPERATOR <u>Three States Oil Company</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME																				
3. ADDRESS OF OPERATOR <u>Suite 217 10465 Melody Bldg Northglenn, Colorado</u>		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 <u>1399' from west line and 465' from south line</u> At proposed prod. zone <u>SE/SW</u>		8. FARM OR LEASE NAME <u>Rangely</u>																				
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>5382'</u>	9. WELL NO. <u>53</u>																				
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT <u>Rangely Field Mancos Shale</u>																				
<table border="0"> <tr> <td colspan="2">NOTICE OF INTENTION TO :</td> <td colspan="2">SUBSEQUENT REPORT OF :</td> </tr> <tr> <td>TEST WATER SHUT-OFF <input type="checkbox"/></td> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>WATER SHUT-OFF <input type="checkbox"/></td> <td>REPAIRING WELL <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREAT <input type="checkbox"/></td> <td>MULTIPLE COMPLETE <input type="checkbox"/></td> <td>FRACTURE TREATMENT <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>SHOOT OR ACIDIZE <input type="checkbox"/></td> <td>ABANDON <input type="checkbox"/></td> <td>SHOOTING OR ACIDIZING <input type="checkbox"/></td> <td>ABANDONMENT <input checked="" type="checkbox"/></td> </tr> <tr> <td>REPAIR WELL <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> <td>(Other) _____</td> <td></td> </tr> </table>		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 type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input checked="" type="checkbox"/>	REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____		11. SEC., T., S., M., OR BLK. AND SURVEY OR AREA <u>11 IN 102w</u>
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		12. COUNTY <u>Rio Blanco</u>																				
		13. STATE <u>Colorado</u>																				

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 _____

Pulled pipe and cemented bottom 50 feet with cement.
Filled balance of hole with shale within 50 feet of top and cemented last 50 feet with cement and planted a 4 inch steel pipe 4 feet above ground with description on it.
Abandonment was made according to State and Federal Regulations.

DVR	<input 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 Gene L. Baum TITLE Owner DATE May 6, 1974

(This space for Federal or State office use)

APPROVED BY De Rogers TITLE DIRECTOR DATE MAY 22 1974

CONDITIONS OF APPROVAL, IF ANY:

