

REV. 7-64

# OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

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

RECEIVED

NOV 24 1970

## 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.)

<b>1.</b> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	<b>5. LEASE DESIGNATION AND SERIAL NO.</b> COLO. OIL & GAS CONSERV. COMM.
<b>2. NAME OF OPERATOR</b> ED. F. DELANEY	<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b>
<b>3. ADDRESS OF OPERATOR</b> P.O. Box 734, Rangely, Colo. 81648	<b>7. UNIT AGREEMENT NAME</b>
<b>4. LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  At proposed prod. zone	<b>8. FARM OR LEASE NAME</b> Getty-Pan American
<b>14. PERMIT NO.</b> 68-226	<b>9. WELL NO.</b> 14-A
<b>15. ELEVATIONS</b> (Show whether DF, RT, GR, etc.)	<b>10. FIELD AND POOL, OR WILDCAT</b> Rangely - Mancos
<b>16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data</b>	<b>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA</b> 3, 1N, 102W, 6th
<b>17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS</b> (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.)	<b>12. COUNTY OR PARISH</b> Rio Blanco
<b>18. I hereby certify that the foregoing is true and correct</b>	<b>13. STATE</b> Colo

### NOTICE OF INTENTION TO:

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

### SUBSEQUENT REPORT OF:

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) <u>Shut-in</u>	

(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 \_\_\_\_\_

Well still shut in. See report of 2/11/70

DVR	✓
FJP	✓
HHM	✓
JAM	✓
JJD	✓

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

SIGNED

TITLE

Agent

DATE

11/20/70

(This space for Federal or State office use)

APPROVED BY

TITLE

DIRECTOR

O &amp; G CONS. COMM.

DATE

DEC 2 1970

CONDITIONS OF APPROVAL, IF ANY:



00039028