

# **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

JAN 24 1975

COLO. OIL &amp; 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 The Marlin Oil Company/N. L. Koin		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 1507 Denver Club Building - Denver, CO 80202		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 1980' FSL, 1980' FEL At proposed prod. zone Same		8. FARM OR LEASE NAME Denny
14. PERMIT NO. 74-946		9. WELL NO. #1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4987.8' GR		10. FIELD AND POOL, OR WILDCAT New Windsor
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27-7N-67W
		12. COUNTY Weld
		13. STATE Colorado



00226871

### 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

#### 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) Status <input checked="" type="checkbox"/>	

(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 11/27/74 - 12/4/74

Attached is a copy of the Completion Report for the subject well.  
 Form #5 will be filed with your office when well is potentialed,  
 within thirty days.

DVR	
FJP	✓
HMM	✓
JAM	✓
JJD	✓
GCH	✓
CGM	

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

SIGNED Kathleen Sedgwick TITLE Landman DATE 1/23/75

(This space for Federal or State office use)

APPROVED BY Al Rogers TITLE DIRECTOR DATE JAN 27 1975  
 CONDITIONS OF APPROVAL, IF ANY:

*file*