



00046576

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

SUBMIT ORIGINAL AND 1 COPY

FOR OFFICE USE ONLY			
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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.)

5. FEDERAL/INDIAN OR STATE LEASE NO.

1. ☒ OIL WELL ☐ GAS WELL ☐ COALBED METHANE ☐ INJECTION WELL ☐ OTHER

6. PERMIT NO. 67-238

2. NAME OF OPERATOR

7. API NO.

3. ADDRESS OF OPERATOR

05 103 7038

8. WELL NAME

Getty-Pan-Am

9. WELL NUMBER

9A

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.

See also space 17 below.)
At surface

At proposed prod. zone

10. FIELD OR WILDCAT

Range ly

12. COUNTY

Rio Blanco

11. QTR. QTR. SEC. T.R. AND MERIDIAN

SEC. 4, T1N. 102W 6th

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

13A. NOTICE OF INTENTION TO:

- ☐ PLUG AND ABANDON
☐ MULTIPLE COMPLETION
☐ COMMINGLE ZONES
☐ FRACTURE TREAT
☐ REPAIR WELL
☐ OTHER

13B. SUBSEQUENT REPORT OF:

- ☐ FINAL PLUG AND ABANDONMENT
(SUBMIT 3RD PARTY CEMENT VERIFICATION
AND JOB LOG)
☐ ABANDONED LOCATION (WELL NEVER DRILLED -
SITE MUST BE RESTORED WITHIN 6 MONTHS)
☐ REPAIRED WELL
☐ OTHER

*Use Form 5 - Well Completion or Recompletion Report and Log
for subsequent report of Multiple Commingled Completions
and Recompletions

13C. NOTIFICATION OF:

- ☒ SHUT-IN, TEMPORARILY ABANDONED
(DATE 1/1/91)
(REQUIRED EVERY 6 MONTHS)
☐ PRODUCTION RESUMED
(DATE)
☐ LOCATION CHANGE (SUBMIT NEW PLAT)
☐ WELL NAME CHANGE
☐ OTHER

14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (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

15. DATE OF WORK

RECEIVED

JAN 08 1991

NO PRODUCTION

COLO. OIL & GAS CONS. COMM

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

SIGNED

Jack K. Hillis

TELEPHONE NO.

464-0565

NAME (PRINT)

JACK K. HILLIS

TITLE

OWNER

DATE

1-3-91

(This space for Federal or State office use)

APPROVED

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: