

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

00493052

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.

C-37225 ACQ

6. PERMIT NO.

901450

7. API NO.

05 017 7202

8. WELL NAME

Mount Pearl Unit (Sec.30)

9. WELL NUMBER

13G-30

10. FIELD OR WILDCAT

Mount Pearl Unit

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

NW/SW 30-T13S-R47W

SCANNED

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 Reinstate expired
permit to drill

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 _____)
(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 _____

Previously approved Permit to Drill No. 901450 has expired. Union Pacific Resources herein requests reinstatement of this permit to drill. Subject to partner approval, UPRC anticipates spudding sometime in May, 1991.

EXTENDED TO AUG, 17, 1991

RECEIVED

APR 30 1991

COLO. OIL & GAS CONS. COMM.

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

SIGNED

Kris Curran

TELEPHONE NO. 817/877-7325

NAME (PRINT)

Kris Curran

TITLE Regulatory Analyst

DATE

4-29-91

(This space for Federal or State office use)

APPROVED

Dennis R. Bicknell

TITLE

Director

DATE

5/1/91

CONDITIONS OF APPROVAL, IF ANY:

Upon verbal request prior to expiration. ✓

IN FUTURE PLEASE SUBMIT EXTENSION REQUEST PRIOR TO EXPIRATION