

STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES
SUBMIT ORIGINAL AND 1 COPY



LOC # 329595

FOR OFFICE USE			
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SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen of plug back to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals.)

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

5. FEDERAL/INDIAN OR STATE LEASE NO.

6. PERMIT NO.
93-1610

2. NAME OF OPERATOR

SNYDER OIL CORPORATION

7. API NO.

05123175760000

3. ADDRESS OF OPERATOR

1625 Broadway, Suite 2200

8. WELL NAME

BERRY

CITY

Denver

STATE

CO

ZIP CODE

80202

9. WELL NUMBER

26-12L

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 14 below.)

At surface

1792'FSL & 643'FWL

At proposed production zone

SAME

12. COUNTY

WELD

10. FIELD OR WILDCAT

WATTENBERG CODELL

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

6TH PM

NWSW

26

T3N

R67W

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/Commingle 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: WATER BASE BENTONITIC
TREATMENT PLAN

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

SEE ATTACHED NOTICE OF LAND TREATMENT OF WATER-BASED
BENTONITIC DRILLING FLUIDS.

THIS IS THE FINAL RECLAMATION
NO FURTHER RECLAMATION WILL BE PERFORMED.

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

SIGNED

Mike Iske

PHONE N (303) 330-2200

NAME (PRINT) MIKE ISKE

TITLE ENGR. TECH.

DATE 03/25/94 4/8/94

(This space for Federal or State office use)

APPROVED

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NOTICE
OF
LAND TREATMENT
OF
WATER-BASED BENTONITIC DRILLING FLUIDS

In compliance with Rule 911 of "Rules & Regulations" established by the Colorado Oil & Gas Conservation Commission, notice is hereby provided for the land treatment of water based bentonitic drilling fluids.

1. OPERATOR INFORMATION:

NAME OF OPERATOR: SNYDER OIL CORPORATION

ADDRESS OF OPERATOR: 1625 BROADWAY, SUITE 2200
DENVER, CO 80202

PHONE NUMBER OF OPERATOR: 303-592-8500

2. PRIMARY CONTACT PERSON:

NAME: BOB AMEN POSITION/TITLE: LAND RELATIONS TECH.

ADDRESS: 3939 SOCO PARKWAY
EVANS, COLORADO 80620

PHONE NUMBER: 303-330-2200

3. LAND TREATMENT INFORMATION:

LEGAL DESCRIPTION OF SITE: SEC. 22 T 3 N/S. R 67 #/W S1/2 SW1/4

COUNTY WELD, STATE COLORADO

WELLS AFFECTED: MAYER 22-15L, MAYER 22-10L, BERRY 26-11, BERRY 26-12

NAME OF SURFACE OWNER: WALTER MAYER & DOROTHY MAYER

ADDRESS OF SURFACE OWNER: 9704 St Hwy 66, PLATTEVILLE, CO 80651

SURFACE TENNANT RANDY MAYER

PHONE NUMBER/SURFACE OWNER: DAYTIME: _____ EVENING: 785-2371

4. ESTIMATED VOLUME OF DRILLING FLUIDS TO BE LAND TREATED: _____

4000 BBLS / well

5. TOTAL ACREAGE OF SITE: 20

6. TOPOGRAPHIC, GEOLOGIC, AND HYDROLOGIC DESCRIPTION OF THE LAND TREATMENT SITE: (USE THE ATTACHED SKETCH SHEET TO SHOW THESE FEATURES, IF APPROPRIATE)

TOPOGRAPHICS: (DESCRIBE OR ATTACH 8-1/2" X 11" COPY OF MAP OF SITE)
SEE ATTACHED MAP.

GEOLOGICS: (DESCRIBE PROMINENT GEOLOGIC FEATURES, IF ANY)
None

HYDROLOGICS: (DESCRIBE ANY PONDS, DITCHES, CREEKS, RIVERS, OR OTHER WATERS IN OR NEAR PROXIMITY TO THIS SITE:
Ditch in NW 1/4 OF SECTION.

7. LAND TREATMENT PLAN: (BRIEFLY DESCRIBE THE METHOD BY WHICH THE DRILLING FLUIDS WILL BE INCORPORATED INTO THE SITE SOILS).
FLUIDS WILL BE SPREAD ON LOCATION BY TRUCK. FARMER
WILL CULTIVATE INTO SOILS.

8. SURFACE OWNER INFORMATION:

SURFACE OWNER AUTHORIZATION: I Walter Mayer + Dorothy Mayer

DO HEREBY DECLARE THAT I AM THE OWNER OF THE ABOVE DESCRIBED LAND AND DO HEREBY AUTHORIZE THE ABOVE NAMED OPERATOR/AGENT TO SPREAD DRILLING FLUIDS ON THE LAND IN ACCORDANCE WITH THE TREATMENT PLAN DESCRIBED ELSEWHERE IN THIS APPLICATION.

Walter Mayer
 SIGNATURE OF SURFACE OWNER(S)

4-7-94
 DATE

Robert Allen
 SIGNATURE OF WITNESS(S)

4-7-94
 DATE

SOCIAL SECURITY NUMBER(S)

