



02469102

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

03-123-17730

LOC# 329693

SW 4 - 2 N - 67 W

## FOR OFFICE USE

ET	FE	UC	SE
----	----	----	----

## 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.  
93-1809

2. NAME OF OPERATOR

SNYDER OIL CORPORATION

3. ADDRESS OF OPERATOR

1625 Broadway, Suite 2200

CITY

Denver

STATE

CO

ZIP CODE

80202

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

At surface

661'FSL &amp; 647'FWL

At proposed production zone  
SAME

7. API NO.

05123177200000

8. WELL NAME

BERRY

9. WELL NUMBER

26-13L

10. FIELD OR WILDCAT

WATTENBERG CODELL

12. COUNTY

WELD

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

6TH PM

SWSW

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 Rule No. 911

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 ST

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

Reviewed by DGB

TITLE EPS

DATE

8/17/95

CONDITIONS OF APPROVAL, IF ANY: