



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 27 1976

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"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Rex Monahan		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 1231, Sterling, Colorado		8. FARM OR LEASE NAME Henderson	
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 600' FNL and 660' FWL NW/4 SE/4		9. WELL NO. #2	
14. PERMIT NO. 69-424		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4008 KB	
10. FIELD AND POOL, OR WILDCAT Yoyo "J" Sand		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 24-8N-53W	
12. COUNTY Logan		13. STATE Colorado	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	FULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(Other) Change of Operator

(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 \_\_\_\_\_

This well was formerly owned and operated by Domestic Energy, Inc.  
and the undersigned became operator of the property effective November 1, 1975.

DVR	
FJP	
HHS	✓
JAM	✓
JJD	✓
GCH	✓
CGM	✓

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

SIGNED <u>[Signature]</u>	TITLE <u>Operator</u>	DATE <u>1-26-76</u>
(This space for Federal or State office use)		
APPROVED BY <u>[Signature]</u>	TITLE <u>DIRECTOR</u> <u>O &amp; G CONS. COMM.</u>	DATE <u>FEB 3 1976</u>
CONDITIONS OF APPROVAL, IF ANY:		

*Alex*