

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



00224575

JUN 14 1985

File in duplicate for Patented and Federal lands.
File in triplicate for State lands.

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DEED OR TOWN & RANGE SERIAL NO.	
2. NAME OF OPERATOR Gary-Williams Oil Producer, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 115 Inverness Drive East, Englewood, CO 80112-5116		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2145' FSL and 930' FWL (NW SW) At proposed prod. zone		8. FARM OR LEASE NAME Buck Peak State	
		9. WELL NO. 30-12	
		10. FIELD AND POOL, OR WILDCAT Buck Peak	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW SW 30-T6N-R89W	
14. PERMIT NO. 81-1391	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7331 GR	12. COUNTY Routt	13. STATE Colorado

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"/>	PULL 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) <u>Status</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.)

18. Date of work _____ * Must be accompanied by a cement verification report.

The above mentioned well is shut-in, waiting further action until the #34-4 Dry Creek well has been completed. A decision to plug and abandon the well will be made at that time.



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

SIGNED <u>Dan Hall</u>	TITLE <u>Drilling & Completion Engineer</u>	DATE <u>6/11/85</u>
(This space for Federal or State office use)		
APPROVED BY <u>William R. Smith</u>	TITLE <u>DIRECTOR</u>	DATE <u>JUN 21 1985</u>
CONDITIONS OF APPROVAL, IF ANY:		

plugging procedure must be approved prior to abandonment