

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



00209620

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

RECEIVED

OCT 22 1984

COLO. OIL & GAS CONSERV. COMM.

LEASE DESIGNATION AND SERIAL NO.

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 checked="" type="checkbox"/> OTHER		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR Frank H. Walsh 94100 (303) 522-1839		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR Box 30, Sterling, CO 80751		8. FARM OR LEASE NAME Keith Ashbaugh
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 NE SE Section 15-7N-59W		9. WELL NO. #1
14. PERMIT NO. 71-575		10. FIELD AND POOL, OR WILDCAT Cattle 10160
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4942 KB		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 15-7N-59W
		12. COUNTY Weld 123
		13. STATE Colorado

D-Snd.

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"/>	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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input 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.)

Date of work 4-11-84

Plugged and abandoned well per Donnelly Casing Pulling Co.  
Invoice #84-0011, copy attached.

EXHAUSTED  
GAS WELL

WRS	
FSP	
WHS	✓
JW	✓
RCC	
LAR	✓
CON	
ED	

18. I hereby certify that the foregoing is true and correct  
SIGNED [Signature] TITLE Owner DATE 10-18-84

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE DEC 7 '84  
CONDITIONS OF APPROVAL, IF ANY: O & G Cons. Comm.