

OIL AND GAS CONSERVATION COMMISSION

DEPARTMENT OF NATURAL RESOURCES

STATE OF COLORADO

00270121

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

JUN 26 1972

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 checked="" type="checkbox"/> X-Salt Water Disposal		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR Skelly Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 1860 Lincoln Street-Denver, Colorado 80203		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 990' FEL and 330' FNL of Section 20-9N-53W At proposed prod. zone		8. FARM OR LEASE NAME C. F. Green	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4170' K.B.		10. FIELD AND POOL, OR WILDCAT Walker-Dakota "J"	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 20-T9N-R53W	
		12. COUNTY Logan	13. STATE Colorado

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	FULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Convert to Salt Water Disposal <input checked="" type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <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 APPLICATION TO CONVERT TO SALT WATER DISPOSAL

Order 1-13

DVR	
FJP	✓
WHM	✓
JAM	✓
JJD	✓

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

SIGNED Franklin Wheeler TITLE Dist. Environmental Engr. DATE June 23, 1972

(This space for Federal or State office use)

APPROVED BY W. Rogers
CONDITIONS OF APPROVAL, IF ANY:

DIRECTOR

OIL & GAS COM.

TITLE

DATE

SEP 25 1972

Salt Water Disposal