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00270031

STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCESFile 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"/>		7. UNIT AGREEMENT NAME Mt. Hope	
2. NAME OF OPERATOR Rex Monahan		8. FARM OR LEASE NAME Mt. Hope	
3. ADDRESS OF OPERATOR Box 1231, Sterling, Colorado 80751		9. WELL NO. 13	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NESWSW At proposed prod. zone		10. FIELD AND POOL, OR WILDCAT Mt. Hope	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 19-9N-53W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY Logan	
		13. STATE Colo.	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐PULL OR ALTER CASING ☐FRACTURE TREAT ☐MULTIPLE COMPLETE ☐SHOOT OR ACIDIZE ☐ABANDON ☐REPAIR WELL ☐CHANGE PLANS ☐

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐REPAIRING WELL ☐FRACTURE TREATMENT ☐ALTERING CASING ☐SHOOTING OR ACIDIZING ☐ABANDONMENT* ☐

(Other) status report

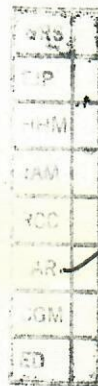
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.

This well has been plugged.



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

SIGNED _____

TITLE Operator

DATE 12-13-85

(This space for Federal or State office use)

APPROVED BY _____

TITLE

DIRECTOR

DATE DEC 20 1985

CONDITIONS OF APPROVAL, IF ANY:

O & G Cons. Comm.