

OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

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

RECEIVED

JAN 20 1975

5. LEASE DESIGNATION AND SERIAL NO.
FEE Book 374 Page 393
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NA

7. UNIT AGREEMENT NAME

None

8. FARM OR LEASE NAME

Villard

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Blue Gravel Field

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 14, T 9 N - R 91 W

12. COUNTY OR PARISH

Moffat

13. STATE

Colorado

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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Jack J. Grynberg

3. ADDRESS OF OPERATOR

1050-17th Street, Suite 1950, Denver, CO 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)

At surface

2123' FNL 788' FEL (SENE) Sec. 14, T 9 N - R 91 W

At proposed prod. zone

As Above

14. PERMIT NO.

75 23

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6602.9 GL

16.

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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Work Completed to Date ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT ☐

(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.)

See attached drilling report for details.

DVR	<input checked="" type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
GCH	<input checked="" type="checkbox"/>
CGN	<input type="checkbox"/>

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

SIGNED

Cecil D. Gritz

TITLE Drilling & Prod. ManagerDATE 1/17/75

(This space for Federal or State office use)

DIRECTOR

APPROVED BY

TITLE

DATE

JAN 22 1975

CONDITIONS OF APPROVAL, IF ANY:

file