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

SUBMIT ORIGINAL AND 1 COPY

FOR OFFICE USE ONLY			
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**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.)

<b>1. OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>COALBED METHANE</b> <input type="checkbox"/> <b>INJECTION WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>			<b>5 FEDERAL INDIAN OR STATE LEASE NO.</b>
<b>2 NAME OF OPERATOR</b> Rex Monahan			<b>6 PERMIT NO.</b>
<b>3 ADDRESS OF OPERATOR</b> Box 1231			<b>7 API NO.</b> 05-075-07207
<b>CITY</b> Sterling	<b>STATE</b> Colorado	<b>ZIP CODE</b> 80751	<b>8 WELL NAME</b> Casement 13-33
<b>4 LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements See also space 17 below.) At surface 665' FWL & 1964' FSL			<b>9 WELL NUMBER</b> #1
At proposed prod. zone			<b>10 FIELD OR WILDCAT</b> Cliff "D" Sand
<b>12 COUNTY</b> Logan			<b>11 QTR. QTR. SEC., T.R. AND MERIDIAN</b> NWSW Sec. 33-12N-54W

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

**13A. NOTICE OF INTENTION TO:**

- ☐ PLUG AND ABANDON
- ☐ MULTIPLE COMPLETION
- ☐ COMMINGLE ZONES
- ☐ FRACTURE TREAT
- ☐ REPAIR WELL
- ☐ OTHER \_\_\_\_\_

**13B. SUBSEQUENT REPORT OF:**

- ☐ FINAL PLUG AND ABANDONMENT  
(SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)
- ☐ ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS)
- ☐ REPAIRED WELL
- ☐ OTHER \_\_\_\_\_

*\*Use Form 5 - Well Completion or Recompletion Report and Log for subsequent reports of Multiple/Commingle Completions and Recompletions***13C. NOTIFICATION OF:**

- ☒ SHUT-IN TEMPORARILY ABANDONED  
(DATE 1988)  
(REQUIRED EVERY 6 MONTHS)
- ☐ PRODUCTION RESUMED  
(DATE \_\_\_\_\_)
- ☐ LOCATION CHANGE (SUBMIT NEW PLAT)
- ☐ WELL NAME CHANGE
- ☐ OTHER \_\_\_\_\_

**14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM** (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)**15. DATE OF WORK** \_\_\_\_\_

This well is shut-in and an extension is requested to the end of ultimately employing the well for enhanced oil recovery.

RECEIVED  
MAR 16 1994  
COLORADO OIL & GAS CONSERVATION COMMISSION

**16. I hereby certify that the foregoing is true and correct**

SIGNED \_\_\_\_\_ TELEPHONE NO. 303-522-0774

NAME (PRINT) Rex Monahan TITLE Operator DATE 3-15-94

(This space for Federal or State office use)

APPROVED \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

DATE

10-20-94

Comply with Rule 324-b. Run and submit Mechanical Integrity Test within 6 months or P & A well.