

DEPARTMENT OF NATURAL RESOURCES  
GAS CONSERVATION COMMISSION  
THE STATE OF COLORADO



RECEIVED

JUN 19 1973

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL  
WELL ☐

GAS  
WELL ☐

OTHER ☐

SINGLE  
ZONE ☐

MULTIPLE  
ZONE ☐

2. NAME OF OPERATOR

Frank H. Walsh

3. ADDRESS OF OPERATOR

Box 30, Sterling, Colorado 80751

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

At surface

C NE NE Section 30-T3S, R58W

At proposed prod. zone

Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE

4 miles east, 3 miles north, Cabin Creek, Colorado

15. DISTANCE FROM PROPOSED

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT.

(Also to nearest drlg. line, if any)

660' ✓

16. NO. OF ACRES IN LEASE \*

640

17. NO. OF ACRES ASSIGNED

TO THIS WELL

40

18. DISTANCE FROM PROPOSED LOCATION

TO NEAREST WELL, DRILLING, COMPLETED,  
OR APPLIED FOR, ON THIS LEASE, FT.

None

19. PROPOSED DEPTH

6000' ✓

20. ROTARY OR CABLE TOOLS

Rotary

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

5148 Ground

22. APPROX. DATE WORK WILL START

June 24, 1973

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
10 3/4	8 5/8	28#	100	100 sks

\* DESCRIBE LEASE

Section 30, Township 3 South, Range 58 West,

Adams County, Colorado

30 000

DVR	
EP	✓
MM	
IM	✓
JO	6-19-73

ck. 17307

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

*F H Walsh*

TITLE

Operator

DATE

June 18, 1973

(This space for Federal or State office use)

PERMIT NO.

73 391

APPROVAL DATE

DIRECTOR

APPROVED BY

*Al Rogers*

TITLE

CHIEF OF BUREAU

DATE

JUN 20 1973

CONDITIONS OF APPROVAL, IF ANY:

See Instructions On Reverse Side

A.P.I. NUMBER

15 001 6697