

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

RECEIVED

JAN 30 1978



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

OIL & GAS CONS. COMM.

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 checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR OXOCO		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 610 Newport Center Dr., St. 630, Newport Beach, Ca. 92660		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 SE NE Section 31 At proposed prod. zone Same		8. FARM OR LEASE NAME UPRR-Linnebur
14. PERMIT NO. 74-972	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5020' GL - 5026' KB	9. WELL NO. 3
		10. FIELD AND POOL, OR WILDCAT Lone Tree
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 31-3S-59W
		12. COUNTY Adams
		13. STATE Colo.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>	Change of Operator <input checked="" 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 1/1/78

This well was formerly operated by RICHCO, with Quest Oil Company as Designated Agent.

Effective 1/1/78, OXOCO becomes operator of this well.

DVR	
FJP	
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
RLS	
CGM	

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

SIGNED Patrick C. Haley TITLE Vice President DATE 1-1-78

(This space for Federal or State office use)

APPROVED BY W. Rogers TITLE DIRECTOR DATE FEB 1 1978

CONDITIONS OF APPROVAL, IF ANY:

OIL AND GAS CONSERVATION COMMISSION  
DEPARTMENT OF NATURAL RESOURCES  
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1.

OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR

OXOCO

3. ADDRESS OF OPERATOR

610 Newport Center Drive, Suite 630, Newport Beach, Calif., 92660

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

At surface SE NE Sec. 31

At proposed prod. zone

Same

14. PERMIT NO.

74-972

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

5020' GL, 5026' KB

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

Change of Operator

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

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CGM	

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

SIGNED

*C. H. Hargrove*

TITLE

Agent

DATE

1-10-78

(This space for Federal or State office use)

APPROVED BY

*M. Rogers*

TITLE

DIRECTOR  
O & G CONS. COMM.

DATE

JAN 18 1978

CONDITIONS OF APPROVAL, IF ANY:

X