



00062014

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

RECEIVED

MAY 29 1981

Form Approved.
Budget Bureau No. 42-R1424

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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐ other ☐
well well

2. NAME OF OPERATOR
Martin Exploration Management Corp.

3. ADDRESS OF OPERATOR
1919 14th St., #400 Boulder, Co 80302

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FSL, 1980' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐ ☐

FRACTURE TREAT ☐ ☐

SHOOT OR ACIDIZE ☐ ☐

REPAIR WELL ☐ ☐

PULL OR ALTER CASING ☐ ☐

MULTIPLE COMPLETE ☐ ☐

CHANGE ZONES ☐ ☐

ABANDON* ☐ ☐

(other) CURRENT STATUS ☒

5. LEASE

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
SINKEY

9. WELL NO.
19-1

10. FIELD OR WILDCAT NAME
Wildcat

11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA
Sec. 19 T1N, R69W

12. COUNTY OR PARISH
Boulder

13. STATE
Colorado

14. API NO.
05 013 6056

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5135' GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Plans have been changed and this well is not going to be drilled for approximately 2-3 months.
If necessary a new permit to drill shall be filed.

Subsurface Safety Valve: Manu. and Type

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

SIGNED Terry X. McConnell TITLE Geologist DATE May 27, 1981

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE JUN 1 1981
CONDITIONS OF APPROVAL, IF ANY: O & G Cons. Comm

*See Instructions on Reverse Side

DVR	
FJP	
BHM	
JAM	
JJD	
FLS	
CSM	

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