



STATE OF COLORADO
 OIL AND GAS CONSERVATION COMMISSION
 DEPARTMENT OF NATURAL RESOURCES
 SUBMIT ORIGINAL AND 1 COPY

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FOR OFFICE USE			
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SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen of plug back to a different reservoir. Use "APPLICATION FOR PERMIT-" for such proposals.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER		5. FEDERAL/INDIAN OR STATE LEASE NO.
2. NAME OF OPERATOR Gerrity Oil & Gas Corporation		6. PERMIT NO. 93-393
3. ADDRESS OF OPERATOR 4100 E. Mississippi Ave., #1200		7. API NO. 05-013-06325
CITY STATE ZIP CODE Denver CO 80222		8. WELL NAME Culver
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 14 below.) At surface 2333' FNL & 890' FWL Sec. 16		9. WELL NUMBER MC #16-12
At proposed production zone same		10. FIELD OR WILDCAT Wattenberg
12. COUNTY Boulder		11. QTR. QTR. SEC., T.R. AND MERIDIAN NW SW Sec. 16-T1N-69W

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

<p>13A. NOTICE OF INTENTION TO:</p> <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> COMMINGLE ZONES <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> OTHER:	<p>13B. SUBSEQUENT REPORT OF:</p> <input type="checkbox"/> FINAL PLUG AND ABANDONMENT SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG) <input checked="" type="checkbox"/> ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS) <input type="checkbox"/> REPAIRED WELL <input type="checkbox"/> OTHER: *Use Form 5 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingled Completions and Completions	<p>13C. NOTIFICATION OF:</p> <input type="checkbox"/> SHUT-IN/TEMPORARILY ABANDONES DATE: (REQUIRED EVERY 6 MONTHS) <input type="checkbox"/> PRODUCTION RESUMED DATE: <input type="checkbox"/> LOCATION CHANGE (SUBMIT NEW PLAT) <input type="checkbox"/> WELL NAME CHANGE <input type="checkbox"/> OTHER:
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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

**Gerrity Oil & Gas is abandoning this location.
 Location was never drilled no surface disturbance.**

RECEIVED
 APR 4 - 1994
 OIL & GAS CONSERVATION COMMISSION

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

SIGNED *Thomas W. Delong, Jr.* PHONE NO. (303) 757-1110

NAME (PRINT) Thomas W. Delong, Jr. TITLE Senior Engineer DATE 03/31/94

(This space for Federal or State office use)

APPROVED *[Signature]* TITLE _____ DATE 4/5/94

CONDITIONS OF APPROVAL, IF ANY:

