

STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCEScate for Patented and Federal lands.
cate for State lands.RECEIVED
JAN 28 19855. LEASE DESIGNATION & SERIAL NO.
Fee

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

JOSEPH P. DOYLE

3. ADDRESS OF OPERATOR

Box 1387, Steamboat Springs, CO 80477

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

See also space 17 below.)

At surface 675' FSL, 2003' FEL, Sec, 24, T6N, R86W, 6th P.M.

At proposed prod. zone

7. UNIT AGREEMENT NAME

Non- Unitized

8. FARM OR LEASE NAME

McDermott

9. WELL NO.

#1 McDermott

10. FIELD AND POOL, OR WILDCAT

Curtis

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

SW 1/4 Sec. 24, T6N, R86W

14. PERMIT NO.

82-2164

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

6678 DF

12. COUNTY

Routt

13. STATE

Colorado

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) Repair CasingPULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

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.)

18. Date of work 1985

* Must be accompanied by a cement verification report.



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

SIGNED

Joseph P. Doyle

TITLE

OWNER

DATE

JAN 25, 1985

(This space for Federal or State office use)

APPROVED BY

William Smith

TITLE

DIRECTOR

DATE

APR 22 1985

CONDITIONS OF APPROVAL, IF ANY:

Please advise where hole was and how it was repaired