



00203984

DEPARTMENT OF NATURAL RESOURCES OF THE STATE OF COLORADO

AUG -3 1970

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

COLO. 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 type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. | | | | | | | | | | | | | | | | | | | | |
| 2. NAME OF OPERATOR Rex Monahan | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | | | | | | | | | | | | | | | | | | | | |
| 3. ADDRESS OF OPERATOR Box 1231, Sterling, Colorado | | 7. UNIT AGREEMENT NAME Atwood East | | | | | | | | | | | | | | | | | | | | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2294' from E line; 1660' from S line Sec. 25-7N-53W At proposed prod. zone "D" Sand | | 8. FARM OR LEASE NAME | | | | | | | | | | | | | | | | | | | | |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3984 KB | 9. WELL NO. 16 | | | | | | | | | | | | | | | | | | | | |
| 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data | | 10. FIELD AND POOL, OR WILDCAT Atwood East | | | | | | | | | | | | | | | | | | | | |
| <table border="0"> <tr> <td colspan="2">NOTICE OF INTENTION TO:</td> <td colspan="2">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>TEST WATER SHUT-OFF <input type="checkbox"/></td> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>WATER SHUT-OFF <input type="checkbox"/></td> <td>REPAIRING WELL <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREAT <input type="checkbox"/></td> <td>MULTIPLE COMPLETE <input type="checkbox"/></td> <td>FRACTURE TREATMENT <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>SHOOT OR ACIDIZE <input type="checkbox"/></td> <td>ABANDON <input checked="" type="checkbox"/></td> <td>SHOOTING OR ACIDIZING <input type="checkbox"/></td> <td>ABANDONMENT <input type="checkbox"/></td> </tr> <tr> <td>REPAIR WELL <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> <td>(Other) <input type="checkbox"/></td> <td></td> </tr> </table> | | 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 checked="" 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"/> | | 11. SEC., T., R., M., OR BLK. AND SUBVY OR AREA SW NW SE Sec. 25-7N-53W |
| 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 checked="" 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"/> | | | | | | | | | | | | | | | | | | | | |
| | | 12. COUNTY Logan | | | | | | | | | | | | | | | | | | | | |
| | | 13. STATE Colo. | | | | | | | | | | | | | | | | | | | | |

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 Approx. August 7, 1970

Run sand from PBTD to 4390' and dump 5 sacks of cement. Heavy mud to 333' and dump 5 sacks of cement. Heavy mud to 18' and dump 5 sacks of cement. Weld plate on surface casing.

| | |
|-----|-------------------------------------|
| DVR | |
| FJP | <input checked="" type="checkbox"/> |
| HHM | |
| JAM | <input checked="" type="checkbox"/> |
| JJD | <input checked="" type="checkbox"/> |

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

SIGNED Rex Monahan TITLE Operator DATE July 30, 1970

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE AUG 7 1970

CONDITIONS OF APPROVAL, IF ANY: