

RECEIVED
MAY 13 1977
COLO. OIL & GAS CONS. COMM.

OGCC F
REV. 7-4



RESERVATION COMMISSION
NATURAL RESOURCES
DEPARTMENT
OF COLORADO

99999999
State and Federal lands.
... in duplicate for State lands.

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 **075-05269**

2. NAME OF OPERATOR Rex Monahan

3. ADDRESS OF OPERATOR P. O. Box 1231, Sterling, Colorado 80751

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface c W/2 SE NW *1980 fml
1650 fml*

5. LEASE DESIGNATION AND SERIAL NO. _____

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME Atwood East Unit

8. FARM OR LEASE NAME Atwood East Unit

9. WELL NO. #10
(formerly Fiebig #4)

10. FIELD AND POOL, OR WILDCAT Atwood East Unit

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 25-7N-53W

12. COUNTY Logan 13. STATE Colorado

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3,981' K.B.

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

NOTICE OF INTENTION TO:

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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	

(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 4-18-77

Moved unit. Dug deadmen and cellar. Dumped rocks on sand. Dumped 5 sacks cement. Set in floor. Worked pipe to 30". Worked pipe to 33". Ran a shot to 2830'. Pulled pipe, 90 total. Tore out floor. Swedged on surface. Well flowing. Mixed and pumped 25 sacks cement to 150'. Loaded junk rack. Tallied pipe. Dug down and pumped 10 sacks cement to base of cellar. Well on cap.

EXHAUSTED
OIL WELL



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

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

SIGNED [Signature] TITLE Operator DATE May 12, 1977

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE MAY 16 1977
O & G CONS. COMM.

CONDITIONS OF APPROVAL, IF ANY:

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