

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

D-033804B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

FEB 25 1976

7. UNIT AGREEMENT NAME

COLORADO OIL & GAS CONS. COMM.

8. FARM OR LEASE NAME

Newton

9. WELL NO.

1-National

10. FIELD AND POOL, OR WILDCAT

Rangely

11. SEC., T., R., M., OR BLE. AND

SURVEY OR AREA  
11, 1N, 102W, 6th P.M.

NE 1/4

12. COUNTY OR PARISH

Rio Blanco

13. STATE

Colorado

1.

OIL WELL ☐ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

O. M. Hagwer

3. ADDRESS OF OPERATOR

P.O. Box 307, Rangely, Colorado

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

See also space 17 below.)

At surface 174 feet west of the East line and 495 feet south of  
the North Line, Section 11.

14. PERMIT NO.

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

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)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

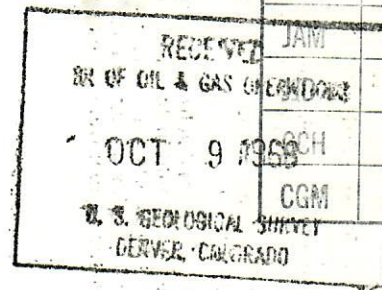
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Filled the hole with dirt and bridged the hole at 30 feet and filled the top 30 feet with cement and set a 6 foot marker. There was only one formation drilled so plugs for different formations were not necessary.



00044021

DVR	
FJP	
HHM	✓
JAM	✓
OGCH	✓
CGM	✓



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

SIGNED

*Fred Green*

TITLE

Bookkeeper

DATE

10-8-68

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

*E. R. HAYMAN*

TITLE

District Engineer

DATE

11/26/68