



OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

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

RECEIVED

OCT 30 1968

COLO. OIL & GAS COM. COMM.

LEASE DESIGNATION AND SERIAL NO.

C-04283B

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.)

7. UNIT AGREEMENT NAME

1. OIL WELL [] GAS WELL [] OTHER []

8. FARM OR LEASE NAME

2. NAME OF OPERATOR Frank Mead

Arrowhead

3. ADDRESS OF OPERATOR

P. O. Box 592 - Rangely, Colo. 81648

9. WELL NO.

15

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)

10. FIELD AND POOL, OR WILDCAT

Rangely - Mancos

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

NE 1/4 SW 1/4 Sec. 12, T-1N,

R-102W, 6th PM

12. COUNTY OR PARISH

13. STATE

14. PERMIT NO.

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

67 502

Rio Blanco

Colo.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF []

PULL OR ALTER CASING []

WATER SHUT-OFF []

REPAIRING WELL []

FRACTURE TREAT []

MULTIPLE COMPLETE []

FRACTURE TREATMENT []

ALTERING CASING []

SHOOT OR ACIDIZE []

ABANDON []

SHOOTING OR ACIDIZING []

ABANDONMENT [x]

REPAIR WELL []

CHANGE PLANS []

(Other) []

(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 6-25-68

Dry and abandoned. Filled hole with loose shale, cleaned ground, and erected marker.

Table with 2 columns and 5 rows: DVR, FJP, HFM, IAM, IJD. Checkmarks are present in the second and fifth rows.

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

SIGNED Frank Mead

TITLE Owner

DATE 10-28-68

(This space for Federal or State office use)

APPROVED BY [Signature] CONDITIONS OF APPROVAL, IF ANY:

TITLE [Signature] DIRECTOR O & G CONS. COMM.

DATE OCT 31 1968