

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

AUG 15 1969

COLO.

5. LEASE DESIGNATION AND SERIAL NO.

OIL & GAS CONS. COMM.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Getty-Pah American

9. WELL NO.

14-A

10. FIELD AND POOL, OR WILDCAT

Rangely-Mancos

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

3-1N-102W

12. COUNTY OR PARISH

Rio Blanco

13. STATE

Colo

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 ☐ GAS ☐
WELL ☐ WELL ☐ OTHER

2. NAME OF OPERATOR

ED. F. DELANEY, OPERATOR

3. ADDRESS OF OPERATOR

P.O. Box 734, Rangely, Colo. 81648

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

At proposed prod. zone

14. PERMIT NO.

68-226

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

5175 Gr

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

Present Status

(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 _____

WELL STILL SHUT IN. WE ARE TRYING TO SECURE THE "DEEP RIGHTS" ON THIS PROPERTY

AND IF SECURED THIS WELL WILL BE DEEPEMED, IF NOT WE WILL ABANDON

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

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

SIGNED

Frank M. Allister

TITLE

Agent

DATE

8/12/69

(This space for Federal or State office use)

APPROVED BY

W. Rogers

TITLE

DIRECTOR

O & G CONS. COMM.

DATE

AUG 18 1969

CONDITIONS OF APPROVAL, IF ANY:



00039030