

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

FEB 13 1970

COLO. OIL & GAS CONS. COMM.

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

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

12. COUNTY OR PARISH

13. STATE

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 [X] 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

14-A

Rangely - Mancos

3, 1N, 102W, 6th

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 []

REPAIR WELL []

CHANGE PLANS []

(Other) Present Status

(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 _____

Well still shut in. We are trying to secure the "Deep Rights" on this property and if secured, this well will be deepened, if not will abandon.

Table with 2 columns and 5 rows: DVR, FJP, HHM, JAM, JJD. Checkmarks are present in the second column for FJP, HHM, JAM, and JJD.

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

SIGNED [Signature] TITLE _____

Agent

DATE 2/11/70

(This space for Federal or State office use)

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

DIRECTOR O & G CONS. COMM.

DATE FEB 16 1970



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