

OIL AND GAS CONSERVATION COMMISSION DEPARTMENT OF NATURAL RESOURCES OF THE STATE OF COLORADO

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



00216925

175

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. OIL & GAS CON. COMM.	
2. NAME OF OPERATOR The Marlin Oil Company/N. L. Koin		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 1507 Denver Club Bldg., Denver, Colorado 80202		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL, 660' FWL (NW $\frac{1}{4}$ NW $\frac{1}{4}$ Section 35) At proposed prod. zone Same		8. FARM OR LEASE NAME Eaton=Law	
14. PERMIT NO. 74-1053		9. WELL NO. #1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4925' Gr		10. FIELD AND POOL, OR WILDCAT New Windsor	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 35-7N-67W	
		12. COUNTY Weld	13. STATE Colorado

16. 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"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
(Other) <input type="checkbox"/>	Status <input checked="" type="checkbox"/>

(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 1/31/75 - 2/6/75

Drilled to T. D. 2/6/75. Ran 129 jts., 4 $\frac{1}{2}$ ", 9 $\frac{1}{2}$ " new casing to 4345' KB. Cemented with 150 sacks 50-50 posmix. Plug down at 9:15 A.M.

Form 5 will be filed when well is potentialed, within next thirty days.

DVR	
FJP	✓
HHM	✓
JAN	✓
JD	✓
GCH	
CGM	

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

SIGNED Kathleen Sedgwick TITLE Land Manager DATE 3/26/75

(This space for Federal or State office use)

APPROVED BY McRogers TITLE DIRECTOR DATE APR 1 1975

CONDITIONS OF APPROVAL, IF ANY:

file