

OGC
REV



00250912

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

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

RECEIVED

APR 27 1973

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.)

5. LEASE DESIGNATION AND SERIAL NO.
COLO. OIL & GAS CONS. COMM.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

G. A. Henderson

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Cedar Creek - Dakota "D"

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

18-9N-53W

1. OIL WELL GAS WELL OTHER **Salt Water Disposal**

2. NAME OF OPERATOR
Skelly Oil Company

3. ADDRESS OF OPERATOR
1860 Lincoln St. - Denver, Colorado 80203

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

330' FNL & 330' FWL Section 18-9N-53W

At proposed prod. zone

14. PERMIT NO.

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

4268' KB

12. COUNTY

Logan

13. STATE

Colorado

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON

REPAIR WELL

CHANGE PLANS

(Other) **Convert to Salt Water Disposal X**

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT

(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 **APPLICATION TO CONVERT TO SALT WATER DISPOSAL**

DVR	
FIP	
WIM	<input checked="" type="checkbox"/>
JAV	<input checked="" type="checkbox"/>
JJO	<input checked="" type="checkbox"/>

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

SIGNED

[Signature]

TITLE **Dist. Operations Sup't.**

DATE **April 27, 1973**

(This space for Federal or State office use)

APPROVED BY

[Signature]

TITLE

DIRECTOR

O & G CONS. COMM.

DATE

MAY 21 1973

CONDITIONS OF APPROVAL, IF ANY:

