



00046521

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

APR 17 1972



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

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.	
2. NAME OF OPERATOR DELANEY PETROLEUM CO. (L. A. DELANEY, OPERATOR)		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 695 E. 27th St., Long Beach, CA 90806		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 880' E 7 80' N of SE corner of lot 10, S4 At proposed prod. zone		8. FARM OR LEASE NAME Getty-Amoco	
14. PERMIT NO. 70-403		9. WELL NO. 20-A	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5181 Gr		10. FIELD AND POOL, OR WILDCAT Rangely - Mancos	
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA S4, Lot 10, T1N, 102W	
		12. COUNTY Rio Blanco	13. STATE 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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input 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 April 4, 1972

This well never produced in commercial amounts.

No Pipe was pulled - Hole was filled with shale to within 10' of top, then filled with cement and marker set.

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

*non comm.*

18. I hereby certify that the foregoing is true and correct  
SIGNED [Signature] TITLE Agent DATE April 14, 1972

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE APR 19 1972  
CONDITIONS OF APPROVAL, IF ANY:

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