

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



01072523

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 & SERIAL NO. FEE	
2. NAME OF OPERATOR CHEVRON U.S.A. Inc. 16700		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 695 Chevron Road, Rangely, CO 81648		7. UNIT AGREEMENT NAME Rangely Weber Sand Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2240' N of S Line, 1210' W of E Line At proposed prod. zone		8. FARM OR LEASE NAME Gentry	
14. PERMIT NO.		9. WELL NO. 3-D	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) KB 5224'		10. FIELD AND POOL, OR WILDCAT Rangely 72370	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3 T1N, R102W, 6th P.M.	
		12. COUNTY Rio Blanco	13. STATE Colorado

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input checked="" type="checkbox"/> Pickle Well		(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.)

18. Date of work Estimate: First Half 1985 * Must be accompanied by a cement verification report.

Well is currently shut in. Plan to circulate corrosion inhibited fluid into the tubing and annulus, and set production packer \pm 50' above csg shoe.

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

SIGNED Roy Chambers, Jr. TITLE Unit Superintendent DATE 1/7/85

(This space for Federal or State office use)

APPROVED BY William Smith TITLE DIRECTOR DATE JAN 11 1985

CONDITIONS OF APPROVAL, IF ANY: O & G Cons. Comm.