

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



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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Water Injector		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 100 Chevron Road, Rangely, Colorado 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 1970' FNL & 1420' FWL Sec. 4 SE $\frac{1}{4}$ NW $\frac{1}{4}$ At proposed prod. zone		8. FARM OR LEASE NAME Newton Associated Unit C	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) RDB-5204		10. FIELD AND POOL, OR WILDCAT Rangely, Colo. 72370	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4 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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Status Update <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.)

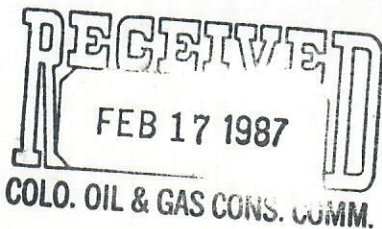
18. Date of work _____

* Must be accompanied by a cement verification report.

This well was shut-in December, 1983.

This well remains shut-in w/2-7/8 TBG. & 7" AD-1 Pkr. set @ 5699'.

TBG. - CSG. annulus treated.



STATUS REPORT REQUIRED
EVERY 6 MONTHS ON SHUT-IN
& TEMPORARILY ABANDONED WELLS.

FOR OFFICE USE ONLY
ET
FE
UG <input checked="" type="checkbox"/>
SE

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

SIGNED J. D. Howard

TITLE Technical Assistant

DATE 2-12-87

(This space for Federal or State office use)

APPROVED BY C. D. Mather

TITLE SR. PETROLEUM ENGINEER

DATE FEB 24 '87

CONDITIONS OF APPROVAL, IF ANY:

API 05-103-1021