

OIL AND GAS CONSERVATION COMMISSION  
OF THE STATE OF COLORADO

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00324309

COLO. OIL & GAS CONS. COMM

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK  
 DRILL  DEEPEN  PLUG BACK

b. TYPE OF WELL  
 OIL WELL  GAS WELL  OTHER  SINGLE ZONE  MULTIPLE ZONE

2. NAME OF OPERATOR  
Edward Mike Davis

3. ADDRESS OF OPERATOR  
1810 First National Bank Bldg., Denver, Colo., 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)  
 At surface 1650' # E 330' # N  
 NE NW 1/4 NE 1/4 of Section 13  
 At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE  
28 miles southeast of Akron, Colorado

15. DISTANCE FROM PROPOSED LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. line, if any) 990'

16. NO. OF ACRES IN LEASE \* 320.00

17. NO. OF ACRES ASSIGNED TO THIS WELL 40

18. DISTANCE FROM PROPOSED LOCATION TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 4000'

20. ROTARY OR CABLE TOOLS Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)  
Staking Plat will be forwarded

22. APPROX. DATE WORK WILL START 11/29/69

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
7-7/8"	8-5/8"	24#	240'	200 sacks

\* DESCRIBE LEASE  
 Township 3 South, Range 50 West  
 Section 12: SE 1/4  
 Section 13: NE 1/4

Tiger-Blanket

DVR	
FJP	
HJM	✓
JAM	✓
JJD	

OK 9355

This well will be drilled to a depth sufficient to penetrate the Skull Creek Formation.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED M. D. Young TITLE Geologist DATE 11/18/69  
M. D. YOUNG

(This space for Federal or State office use)  
 PERMIT NO. 69-715 APPROVAL DATE DIRECTOR

APPROVED BY [Signature] TITLE DIRECTOR DATE NOV 19 1969  
 O & G CONS. COMM.

CONDITIONS OF APPROVAL, IF ANY:

05 021 8414

See Instructions On Reverse Side

