

103-07063



UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate (Other instructions on reverse side)

Form approved Budget Bureau No. 42-21424

5. LEASE DESIGNATION AND SERIAL NO. 6-015000
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
9. WELL NO.
10. FIELD AND POOL, OR WILDCAT
11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA
12. COUNTY OR PARISH 13. STATE

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back or different purposes. Use "APPLICATION FOR PERMIT" for such proposals.)

RECEIVED

1. OIL WELL [ ] GAS WELL [X] OTHER [ ]
2. NAME OF OPERATOR Continental Oil Company COLO. OIL & GAS CONS. COMM.
3. ADDRESS OF OPERATOR P. O. Box 1001, Durango, Colorado
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 726' SW, 723' SW
14. PERMIT NO. 67 337
15. ELEVATIONS (Show whether DV, ST, CR, etc.) 6020' CR

OCT 5 - 1967

Continental Oil Company COLO. OIL & GAS CONS. COMM.

P. O. Box 1001, Durango, Colorado

726' SW, 723' SW

Sec. 19, T2N, R10E

Rio Blanco Colorado

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

NOTICE OF INTENTION TO: TEST WATER SHUT-OFF, FRACTURE TREAT, SHOOT OR ACIDIZE, REPAIR WELL, FULL OR ALTER CASING, MULTIPLE COMPLETE, ABANDON, CHANGE PLANS. SUBSEQUENT REPORT OF: WATER SHUT-OFF, FRACTURE TREATMENT, SHOOTING OR ACIDIZING, REPAIRING WELL, ALTERING CASING, ABANDONMENT.

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.)

Plans to drill the proposed well this year have been changed because the gas purchaser does not have compressor capacity to handle the gas production that would be developed by drilling the well at this time.

It is anticipated that the well will be drilled at a later date and a new Intention to Drill will be filed at that time.

Not to be drilled at this time. Refund fee

Table with columns DVR, FIP, HEM, JAM, JTD and checkmarks.

(Request for reimbursement of \$75.00 State Filing Fee is herein made)

18. I hereby certify that the foregoing is true and correct. Original Signed By: H. D. HALEY, Division Manager, DATE 10-4-67. APPROVED BY: W. Rogers, Director, DATE OCT 13 1967.

\*See Instructions on Reverse Side