



99999999

123-10724

RECEIVED

NOV 1 1983

GAS CONSERVATION COMMISSION  
DEPARTMENT OF NATURAL RESOURCES  
OF THE STATE OF COLORADO

COLORADO OIL & GAS CONSERVATION COMMISSION

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 Plug and Abandon		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR Energy Minerals Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 1000 Security Life Building, Denver, CO 80202		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 600' FEL & 2040' FSL At proposed prod. zone Same		8. FARM OR LEASE NAME Mertens
14. PERMIT NO. 82-969		9. WELL NO. #1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4791' GR 4801' KB		10. FIELD AND POOL, OR WILDCAT Anvil
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33, T7N-R58W
		12. COUNTY Weld
		13. STATE CO

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input checked="" 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 September 29, 1983

- Sand to 6300'. 5 sx plug on top of sand.
- Pulled 5800' casing.
- 25 sx plug @ 210'
- 10 sx plug @ surface
- Cut off below plow level and weld on plate

DVR
FJP
JEM
JAM
ROO
LAR
GCM

EXHAUSTED OIL WELL

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

SIGNED Carmen Bialas TITLE Contracts/Regulations Secretary DATE October 31, 1983  
 (This space for Federal or State office use) DIRECTOR  
 APPROVED BY William Smith TITLE O & G Cons. Comm. DATE DEC 12 1983  
 CONDITIONS OF APPROVAL, IF ANY:



00198535