

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

SUBMIT ORIGINAL AND 1 COPY



00054617

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.)

<input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER			FOR OFFICE USE ONLY ST FR NC IR	
2. NAME OF OPERATOR Snowden Oil Company			7. API NO. 05-121-9498	
3. ADDRESS OF OPERATOR 230 Youngfield Drive			8. WELL NAME Walker	
CITY STATE ZIP CODE Lakewood, CO 80228			9. WELL NUMBER No. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NW NE Sec. 32: T2N-R54 At proposed prod. zone 860' FN 1980' FG			10. FIELD OR WILDCAT Uranus	
12. COUNTY Washington			11. QTR. QTR. SEC., T.R. AND MERIDIAN NW NE Sec 32: T2N R54	

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

13A. NOTICE OF INTENTION TO:

- ☒ PLUG AND ABANDON
- ☐ MULTIPLE COMPLETION
- ☐ COMMINGLED ZONES
- ☐ FRACTURE TREAT
- ☐ REPAIR WELL
- ☐ OTHER _____

13B. SUBSEQUENT REPORT OF:

- ☐ FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)
- ☐ ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS)
- ☐ REPAIRED WELL
- ☐ OTHER _____

*Use Form 3 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingled Completions and Recompletions

13C. NOTIFICATION OF:

- ☐ SHUT-IN, TEMPORARILY ABANDONED (DATE _____) (REQUIRED EVERY 6 MONTHS)
- ☐ PRODUCTION RESUMED (DATE _____)
- ☐ LOCATION CHANGE (SUBMIT NEW PLAT)
- ☐ WELL NAME CHANGE
- ☐ OTHER _____

14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (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)

15. DATE OF WORK _____

Plan to plug and abandon this well within the next six (6) months.
No plans to produce during this time.Please submit plugging
plans for approval
and the date well was
shut in.

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

SIGNED M.A. SnowdenTELEPHONE NO. 303-986-2985NAME (PRINT) M.A. Snowden TITLE OwnerDATE 10-10-95

(This space for Federal or State office use)

APPROVED JK Deacon
CONDITIONS OF APPROVAL, IF ANY:

TITLE

SR. PETROLEUM ENGINEER
O & G Cons. Comm.

DATE

NOV 13 1995