

Historic Well Pad Component Form

This form should be completed for each historic well pad. Call OAHP staff (303-866-5216) prior to assigning a resource number.

I. Resource Identification														
1. Resource Number:				2. Temporary Resource Number:										
3. Resource Property Name:														
II. Geographic Location														
4. Location														
PM		Township		Range		Section			1/4		1/4		1/4	1/4
If section is irregular, explain alignment method:														
5. USGS Quad:				6. County										
7. UTM Coordinates		Datum Used		<input type="checkbox"/> NAD 27		<input type="checkbox"/> NAD 83		<input type="checkbox"/> WGS 84		Other:				
Zone		—		mE				mN						
8. UTM Source		<input type="checkbox"/> Corrected GPS/rectified survey (<5m error)				<input type="checkbox"/> Uncorrected GPS				<input type="checkbox"/> Map template				
9. Well pad elevation (feet):														
III. Resource Description														
10. Well Name/ Number:														
11. Well Type:		<input type="checkbox"/> Modernized historic oil well (New well head)				<input type="checkbox"/> Abandoned/ capped oil well ("Monument" spire)								
<input type="checkbox"/> Shut-in oil well (Large shut-off valve at well head but active)				<input type="checkbox"/> Oil well converted to water injection (Abandoned)										
<input type="checkbox"/> Oil well converted to water injection (Shut-in)				<input type="checkbox"/> Reclaimed (No bore hole evident)				<input type="checkbox"/> Other (Describe below)						
Description:														
12. Current Operator:														
13. Federal or State Lease:														
14. Spud Date:														
15. Well Bore Completion Date:														
16. Component Description:														
17. Modifications (describe and include dates):														
18. Associated Artifacts:														
19. Associated Features or Resources:														
IV. Research Information														
20. Date of Construction / Date Range:														
Source(s) of Information:														
21. Original Operator (if different from #7 above):														
Source(s) of Information:														

22. Historical / Archival Data:

V. Eligibility and Management Recommendations

23. Eligibility of Individual Historic Well Pad

Eligible Not Eligible Need Data Is this an official determination? Yes No

Remarks / Justification:

24. Assessment of historic physical integrity related to significance:

25. National/State Register District Potential: Yes No Explain:

26. Cultural Landscape Potential: Yes No Explain:

27. If yes to 25 or 26, Is this well contributing: Yes No Explain:

28. Recorder's Management Recommendations:

VI. Documentation

29. Photograph Numbers:

Files or negatives stored at:

30. Report Title:

31. Recorder(s):

32. Date:

33. Recorder affiliation:

Phone number / E-mail