

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



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File in duplicate for Patented and Federal lands.
File in triplicate for State lands.

5. LEASE DESIGNATION & SERIAL NO.
OG 72/3342-S
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry Hole		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Quantum Energy Corporation		8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR 7301 Federal Blvd. suite 300, Westminster, Co 80030		9. WELL NO. State 12-5	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface T9N R68W 6th PM; SE 1/4 SW 1/4		10. FIELD AND POOL, OR WILDCAT Canadian River	
At proposed prod. zone 78W		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA T9N R68W 6th PM	
14. PERMIT NO. 831 341		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 8055.4'	
		12. COUNTY Jackson	13. STATE CO

Sec 12

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	

(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.) See attached Drilling Progress Report
18. Date of work 11/3/83, 11, 4, 83, 11/5/83, 11, 5, 84 * Must be accompanied by a cement verification report.

Vertical stamp with checkboxes and handwritten marks.

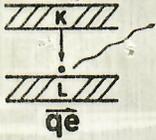
19. I hereby certify that the foregoing is true and correct

SIGNED David DeCola TITLE Pres DATE 12-7-84

(This space for Federal or State office use)

APPROVED BY William R. Smith TITLE DIRECTOR O & G Cons. Comm. DATE FEB 26 1985
CONDITIONS OF APPROVAL, IF ANY:

VIOLATION
REMARKS: Lat



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COLO. OIL & GAS CONS. COMM.

QUANTUM ENERGY CORPORATION

2200 EAST 104TH AVE. SUITE 214 B
DENVER, COLORADO 80233
(303) 451-5500

State 12-5 Plugged & Abandoned 11/5/84

Well plugged with nine sacks of cement in bottom of hole, two sacks at top. Surface casing cut off 2' below surface with cap welded over top, as per telephone conversation with Jim McKee ✓

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03564

COLORADO OIL & GAS CONS. COMM.

TIMBERLINE *True Value* BUILDERS SUPPLY

200 N. Main St.
Walden, CO 80480

P. O. Box 277
723-4422

Customer's Order No. _____ Date 8/29 1984
M. Quantum Energy Corp
Address _____

QUANTITY	DESCRIPTION	UNIT	PRICE	TOTAL
12	Portland # Cement	6 25	82	20
8	" " " "		54	80
pd by check				
# A278074				
transaction # 5152				
Shaw & Brewster				
David Decker				
			137	00

All claims and returned goods MUST be accompanied by this bill.

Rec'd by _____

Thank You!

