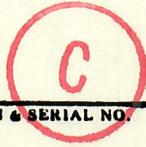




STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

05-075-08915



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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR LASMO Energy Corp.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 1365, Great Bend, Kansas 67530		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 1800' FNL & 2040' FEL of Sec. 18-9N-52W At proposed prod. zone		8. FARM OR LEASE NAME Hamil Bros.	
		9. WELL NO. #18-1	
		10. FIELD AND POOL, OR WILDCAT Hamil Ranch	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 18-9N-52W	
14. PERMIT NO. 811158	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3980' GL	12. COUNTY Logan	13. STATE Co.

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"/> (Other)	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.)

18. Date of work 1-03-89 through 1-10-89 * Must be accompanied by a cement verification report.

Ran sand to 4650'. Dumped 5 sacks cement on sand. Pumped 20 sacks cement in and out bottom of surface at 174'. Dumped 10 sacks cement in top of surface. Welded on cap.

* POLLED CAG @ 3600', 101 STS. SEE CU FOR DETAILS
JR



RECEIVED
JAN 27 1989

COLO. OIL & GAS CONS. COMM

19. I hereby certify that the foregoing is true and correct
SIGNED Robert Donnelly TITLE DONNELLY CASING PULLING CO. Robert Donnelly DATE 1-25-89

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE SUPR. PETROLEUM ENGINEER Oil & Gas Cons. Comm. DATE FEB 02 1989

CONDITIONS OF APPROVAL, IF ANY: