

OGCC FORM 4
Rev. 8/89STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

SUBMIT ORIGINAL AND 1 COPY



FOR OFFICE USE ONLY			
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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		5 FEDERAL, INDIAN OR STATE LEASE NO
1 NAME OF OPERATOR <u>ROMAC EXPLORATION COMPANY, INC</u>		6 PERMIT NO <u>93-500</u>
3 ADDRESS OF OPERATOR <u>4 WARING LAKE</u>		7 API NO <u>05 075 9263</u>
CITY <u>LITTLETON</u>	STATE <u>CO</u>	8 WELL NAME <u>HOUSTON ESTATE</u>
ZIP CODE <u>80121</u>		9 WELL NUMBER <u>20-2</u>
4 LOCATION OF WELL (Report location clearly and in accordance with any State requirements See also space 17 below.) At surface <u>1300' FWL, 150' FSL</u>		10 FIELD OR WILDCAT <u>FIELD (PADRONI)</u>
At proposed prod zone <u>SAME</u>		11 QTR. QTR. SEC. T.R. AND MERIDIAN <u>S45W 20-T9N-R52W 6 1/4</u>
12 COUNTY <u>LOGAN</u>		

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

13A. NOTICE OF INTENTION TO: <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> COMMINGLE ZONES <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> OTHER _____	13B. SUBSEQUENT REPORT OF: <input type="checkbox"/> FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG) <input type="checkbox"/> ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS) <input type="checkbox"/> REPAIRED WELL <input type="checkbox"/> OTHER _____ <small>*Use Form 5 - Well Completion or Recompletion Report and Log for subsequent reports of Multiple/Commingle Completions and Recompletions</small>	13C. NOTIFICATION OF: <input type="checkbox"/> SHUT-IN, TEMPORARILY ABANDONED (DATE _____) (REQUIRED EVERY 6 MONTHS) <input type="checkbox"/> PRODUCTION RESUMED (DATE _____) <input type="checkbox"/> LOCATION CHANGE (SUBMIT NEW PLAT) <input type="checkbox"/> WELL NAME CHANGE <input type="checkbox"/> OTHER <u>Request for Extension</u>
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 <u>± 9-15-93 - Request 120 days</u>		

We herein request an extension of time within which to commence drilling operations under our approved permit A.P.I. Number 05 075 9263, Permit # 93-500. We have had problems with rig scheduling. All terms and conditions of original approval are agreed to.

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

APPROVED

ETA 8-20-93

Extended to 12-24-93

* RECEIVE STOPPED *



ROMAC EXPLORATION COMPANY, INC.
4 Waring Lane, Littleton, Colorado 80121 (303) 292-9516
FAX (303) 292-9516

FACSIMILE TRANSMISSION

DATE: 8-20-93

TO: Morris Bell

FAX NO: 894-2109

FROM: Bob Ruhrs

NUMBER OF PAGES: 2 Including Cover

COMMENT: Call 292-9516 for transmitting

if your approval will be by FAX. otherwise,
hard copy will be sent via First Class mail.
Thanks for your cooperation.

Bob R.

IF NOT RECEIVED IN LEGIBLE FORM, CALL 303-292-9516