

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



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 <b>Skaer Enterprises, Inc.</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR <b>P. O. Box 22418 - Denver, CO 80222</b>		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 <b>SW SE</b> At proposed prod. zone		8. FARM OR LEASE NAME <b>Carey B</b>	
14. PERMIT NO.		9. WELL NO. <b>B-1</b>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		10. FIELD AND POOL, OR WILDCAT <b>Mount Hope East</b>	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>29-T9N-R53W</b>	
		12. COUNTY <b>Logan</b>	
		13. STATE <b>CO</b>	

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/>	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

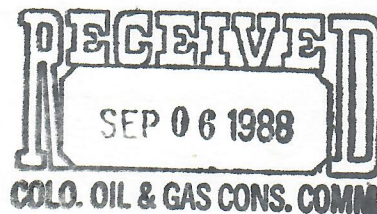
(Other) **Change of Operator & Ownership**

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 Effective date of change 9/1/88 \* Must be accompanied by a cement verification report.

Change of Operator & Ownership to:

Robert Hoss  
P. O. Box 22439  
Denver, CO 80222



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

SIGNED [Signature] TITLE Vice President DATE 9/2/88

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE NOV 10 1988

CONDITIONS OF APPROVAL, IF ANY: O & G Cons. Comm.

# Baney Well Service, Inc.

## DAILY TIME TICKET

2-1-99

COMPANY R. G. Hoss

DATE Feb. 5, 1999

ADDRESS \_\_\_\_\_

LEASE NAME Carey

TYPE OF UNIT 96' Hopper

WELL NO. B-1

COUNTY Jensen

DATE	DESCRIPTION OF WORK	HRS.	RATE PER HOUR	AMOUNT
2-5	Run to g. Pump 30 sacks cement over perfs. Pump 30 sacks cement 975' to 1100'. Lay Hog down. Perforate at 260' Pump 45 sacks cement from 260' perfs up surface. Cut surface + csg. 10' Plug with 5 sacks cement. Rig down.	11		
	RODS	ROD SUBS		
	TUBING	TUB. SUBS		
	PUMP	OTHER		
2-5	FURNISHED Pump cement down well to Plug w/pump truck	11	80 <sup>00</sup>	880 <sup>00</sup>
2-5	Water truck as per attached invr.			350 <sup>00</sup>
	Extra labor to help mix cement	4	18 <sup>00</sup>	72 <sup>00</sup>
	UNIT CHARGE			
	LABOR CHARGE Jim M. Clanchan	11		
	D. J. Stark	11	130 <sup>00</sup>	1430 <sup>00</sup>
	Morgan Pratt	11		872 <sup>00</sup>

W. O. NUMBER

APPROVED: \_\_\_\_\_

FOR CUSTOMER