

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

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.)

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.)

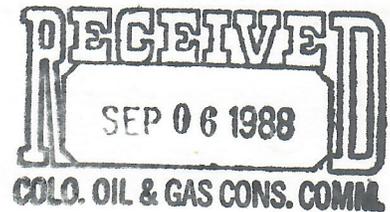
18. Date of work Effective date of change 9/1/88

* Must be accompanied by a cement verification report.

Change of Operator & Ownership to:

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

FOR OFFICE USE ONLY
FILED
INDEXED
SERIALIZED



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

SIGNED

TITLE Vice President

DATE 9/2/88

(This space for Federal or State office use)

APPROVED BY

TITLE DIRECTOR

DATE NOV 10 1988

CONDITIONS OF APPROVAL, IF ANY:

O & G Cons. Commt.

4



Baney Well Service, Inc.

DAILY TIME TICKET

2-15

COMPANY R.G. Hoss DATE Feb. 5, 1999
 ADDRESS _____ LEASE NAME Carey
 TYPE OF UNIT 96' Hopper WELL NO. B-1 COUNTY Dejean

DATE	DESCRIPTION OF WORK	HRS.	RATE PER HOUR	AMOUNT
2-5	Run top. Pump 30 sacks cement over perfs. Pump 30 sacks cement 975' to 1100'. Lay Ho 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 ⁰⁰	880 ⁰⁰
2-5	Water truck as per attached invr.			350 ⁰⁰
	Extra labor to help mix cement	4	18 ⁰⁰	72 ⁰⁰
	UNIT CHARGE			
	LABOR CHARGE Jim M. Blanchard	11		
	D. J. Stark	11	130 ⁰⁰	1430 ⁰⁰
	Morgan Pratt	11		8732 ⁰⁰

APPROVED: O. V. Everts
 FOR CUSTOMER

W. O. NUMBER

Baney Well Service, Inc. 1000 N. 10th St. P.O. Box 1000, Dejean, LA 70524