



STATE 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 type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input checked="" type="checkbox"/> OTHER D&A		5. FEDERAL/INDIAN OR STATE LEASE NO.
2. NAME OF OPERATOR MULL DRILLING COMPANY, INC. #61250		6. PERMIT NO. 93-1
3. ADDRESS OF OPERATOR P.O. BOX 2758		7. API NO. 05-017-07358
CITY WICHITA	STATE KANSAS	8. WELL NAME Nicholarsen
ZIP CODE 67201		9. WELL NUMBER #1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 300' FNL & 1300' FEL		10. FIELD OR WILDCAT Wildcat
12. COUNTY Cheyenne		11. QTR. QTR. SEC., T.R. AND MERIDIAN NE 1/4 Sec. 10-16S-49W

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

<b>13A. NOTICE OF INTENTION TO:</b> <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 _____	<b>13B. SUBSEQUENT REPORT OF:</b> <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 report of Multiple/Commingled Completions and Recompletions</small>	<b>13C. NOTIFICATION OF:</b> <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 checked="" type="checkbox"/> OTHER <u>Drilling Pits</u>
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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 \_\_\_\_\_

Status Update 6-22-94: The Nicholarsen #1 was D&A on 2-5-93. This pits on this lease have not been filled because the ground has been too wet. At our last inspection on 6-20-94, the pit had standing water. We anticipate soil conditions will dry out such that the pit can be filled and the location restored this summer. Therefore we are requesting a six month extension at this time.

RECEIVED  
JUN 28 1994

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

SIGNED [Signature] TELEPHONE NO. 316-264-6366

NAME (PRINT) Mark A. Shreve TITLE Petroleum Engineer DATE 6-22-94

(This space for Federal or State office use)

APPROVED [Signature] TITLE Engineer DATE 7-14-94

CONDITIONS OF APPROVAL, IF ANY: Restore pits and location before September 15, 1994