

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"/> *See Below		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR MULL DRILLING COMPANY, INC. Oper. # 61250		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 2758, Wichita, KS 67201		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 200'N of C NE SE (2180'FSL, 612'FEL SE/4) At proposed prod. zone Same		8. FARM OR LEASE NAME MAUL	
14. PERMIT NO. 88-384		9. WELL NO. #6 *See Below	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GL 3935' KB 3947'		10. FIELD AND POOL, OR WILDCAT Frontera	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 24-15S-42W	
		12. COUNTY Cheyenne	13. STATE Colorado

**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"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>
REPAIR WELL, (Other) <input type="checkbox"/>	CHANGE PLANS: <input type="checkbox"/>

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) *See Below	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

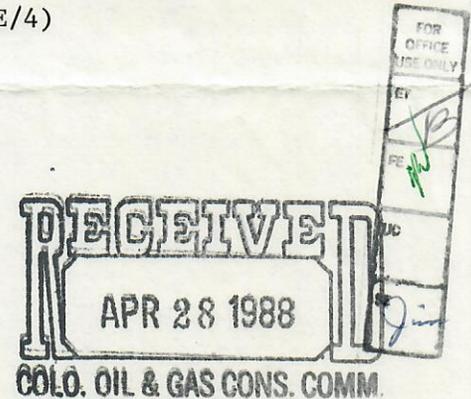
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

18. Date of work \_\_\_\_\_ \* Must be accompanied by a cement verification report.

\*We originally intended this well as #7 Maul, your permit No. 88-384 dated 4/22/88, API# 05-017-6842.

Please change your records accordingly to read:

#6 Maul  
200'N of C NE SE (2180'FSL, 612'FEL SE/4)  
24-15S-42W  
Cheyenne, Colorado



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

SIGNED Michael R. Kidwell TITLE President DATE April 26, 1988

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE SUPR. PETROLEUM ENGINEER DATE APR 28 1988  
CONDITIONS OF APPROVAL, IF ANY: [Signature]