



STATE OF COLORADO  
**MINERAL AND GAS CONSERVATION COMMISSION**  
 DEPARTMENT OF NATURAL RESOURCES

FOR OFFICE USE			
ET	FE	UC	SE
			MP

File in duplicate for Patented and Federal lands. - 6 1987  
 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 Petroleum, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Box 340; Kimball, NE 69145		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 C SE-SE Sec. 22-12N-56W At proposed prod. zone		8. FARM OR LEASE NAME Buczkwoskyj 59185	
14. PERMIT NO.		9. WELL NO. #5	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4,909 GR		10. FIELD AND POOL, OR WILDCAT Sleeper Field	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
		12. COUNTY Weld	13. STATE Colo.

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 checked="" 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 checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL, (Other) <input type="checkbox"/>	CHANGE PLANS: <input type="checkbox"/>	(Other) <input 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 June 1987 \* Must be accompanied by a cement verification report.

Pull Pipe--Plug & Abandon Well  
 Sand across perfs  
 10 Skfs above perfs  
 20 Skfs bottom of surface  
 10 Skfs top of surface  
 Weld plate on top  
 Clean & Level Location

EXHAUSTED  
 OIL WELL

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

PRINT Royal Franklin  
 SIGNED Royal Franklin TITLE Lease Foreman DATE July 1, 1987

(This space for Federal or State office use)

SUPR. PETROLEUM ENGINEER  
 Oil & Gas Cons. Comm.

APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE JUL 09 1987

CONDITIONS OF APPROVAL, IF ANY:

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