



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

FOR OFFICE USE			
RT	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 COMM.

(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 Buczowskyj 59185	
		9. WELL NO. #5	
		10. FIELD AND POOL, OR WILDCAT Sleeper Field	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4,909 GR	12. COUNTY Weld	13. STATE Colo.

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input checked="" type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON	<input checked="" type="checkbox"/>
REPAIR WELL,	<input type="checkbox"/>	CHANGE PLANS:	<input type="checkbox"/>
(Other)			

SUBSEQUENT REPORT OF:

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 checked="" type="checkbox"/>
(Other)			

(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 Sks above perfs
20 Sks bottom of surface
10 Sks 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

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JUL 09 1987