



OGCC FORM 4  
Rev 8/89

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

SUBMIT ORIGINAL AND 1 COPY



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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.)

<b>1. OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>COALBED METHANE</b> <input type="checkbox"/> <b>INJECTION WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>			<b>5. FEDERAL/INDIAN OR STATE LEASE NO.</b>	
<b>2. NAME OF OPERATOR</b> Declar Oil & Gas, Inc.			<b>6. PERMIT NO</b> 92-810	
<b>3. ADDRESS OF OPERATOR</b> P.O. Box 1455			<b>7. API NO.</b> 05-123-8073-1	
<b>CITY</b> Ft. Morgan <b>STATE</b> Colo <b>ZIP CODE</b> 80701			<b>8. WELL NAME</b> Klingingsmith	
<b>4. LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements See also space 17 below.) At surface SE SE			<b>9. WELL NUMBER</b> #1	
At proposed prod. zone 660' FSL, 660' FEL			<b>10. FIELD OR WILDCAT</b> Sleeper	
<b>12. COUNTY</b> Weld			<b>11. QTR. QTR. SEC., T.R. AND MERIDIAN</b> SE SE Sec 21, T12N, R56W	

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

**13A. NOTICE OF INTENTION TO:**

- ☒ PLUG AND ABANDON
- ☐ MULTIPLE COMPLETION
- ☐ COMMINGLE ZONES
- ☐ FRACTURE TREAT
- ☐ REPAIR WELL
- ☐ OTHER

**13B. SUBSEQUENT REPORT OF:**

- ☐ FINAL PLUG AND ABANDONMENT  
(SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)
- ☐ ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS)
- ☐ REPAIRED WELL
- ☐ OTHER

\*Use Form 5 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingle Completions and Recompletions

**13C. NOTIFICATION OF:**

- ☐ SHUT-IN; TEMPORARILY ABANDONED  
(DATE \_\_\_\_\_)  
(REQUIRED EVERY 6 MONTHS)
- ☐ PRODUCTION RESUMED  
(DATE \_\_\_\_\_)
- ☐ LOCATION CHANGE (SUBMIT NEW PLAT)
- ☐ WELL NAME CHANGE
- ☐ OTHER

**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** as Soon as possible with orders

- 1, Set plug @ <sup>6100'</sup> ~~6000'~~ ( cast iron bridge plug)
2. Dump 5 sks cement on top of plug
3. cut and pull free casing. @ 4000'
4. set 20sks plug  $\frac{1}{2}$  in  $\frac{1}{2}$  out of casing stub. AT 600' (40 SKS)
5. set 20sks plug in btm surface @ 270' (40 SKS)
6. set 10sks plug in top of surface
7. cut off surface 4' below ground level, weld on cap.

NOTIFY ED BINKLEY 48 Hrs  
PRIOR TO PLUGGING.

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

SIGNED

*Lewis Camp*

TELEPHONE NO.

970-867-6697

NAME (PRINT)

*Lewis Camp*

TITLE Geologist

DATE Nov. 4 1995

(This space for Federal or State office use)

APPROVED

*APPROVED D E DILLON*

TITLE

SR. PETROLEUM ENGINEER

O & G Cons. Comm.

DATE

MAY 9 1996

CONDITIONS OF APPROVAL, IF ANY:

CANNOT APPROVE PLUGGING UNTIL FORM 5 IS RECEIVED.