

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

RECEIVED

DEC 10 1981

File in duplicate for Patented and Federal lands.  
File in triplicate for State lands.

COLOR. OIL & GAS CONS. COMM.

<p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)</p>		5. LEASE DESIGNATION & SERIAL NO.
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Martin Exploration Management Corporation	8. FARM OR LEASE NAME Tyler	
3. ADDRESS OF OPERATOR 1919 14th St., Suite #400, Boulder, CO 80302	9. WELL NO. 1-4	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface SE SE 860' FEL, 660' FSL At proposed prod. zone Same	10. FIELD AND POOL, OR WILDCAT Wildcat	
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4, T1N, R69W	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5032' GL, 5042' KB	12. COUNTY Boulder
		13. STATE Colorado

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF   
 FRACTURE TREAT   
 SHOOT OR ACIDIZE   
 REPAIR WELL   
 (Other)

PULL OR ALTER CASING   
 MULTIPLE COMPLETE   
 ABANDON   
 CHANGE PLANS

WATER SHUT-OFF   
 FRACTURE TREATMENT   
 SHOOTING OR ACIDIZING   
 (Other)

REPAIRING WELL   
 ALTERING CASING   
 ABANDONMENT\*

(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.

Correct description of lease to:  
Section 4: Lot 1, S $\frac{1}{2}$ NE $\frac{1}{4}$ , SE $\frac{1}{4}$

DVR	
FJP	
HFM	
JAM	
LEP	<input checked="" type="checkbox"/>
RLB	
GM	

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

SIGNED Wish Laram TITLE Geologic Technician DATE 12/11/81

(This space for Federal or State office use)

APPROVED BY W. Rogers TITLE DIRECTOR O & G Cons. Comm DATE DEC 15 1981

CONDITIONS OF APPROVAL, IF ANY:

