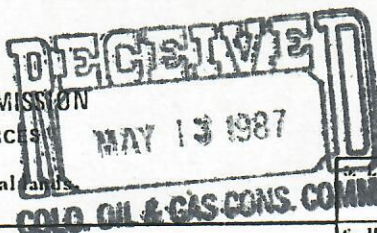




OGCC FORM 4
Rev. 1/78

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.

LEASE DESIGNATION & SERIAL NO.

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <u>Injection Well</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR <u>Poncho Production Company</u>		7. UNIT AGREEMENT NAME <u>Poncho J Sand Unit</u>	
3. ADDRESS OF OPERATOR <u>405 Urban #310 Lakewood, CO 80228</u>		8. FARM OR LEASE NAME <u>Poncho</u>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <u>2126 FEL, 759 FNL</u> At proposed prod. zone <u>SAME</u>		9. WELL NO. <u>6</u>	
10. FIELD AND POOL, OR WILDCAT <u>Poncho</u>		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>NWNE 34 - 3S - 59W</u>	
14. PERMIT NO. <u>71-783, 05-001-6372</u>	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY <u>Adams</u>	13. STATE <u>CO</u>

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON ☐

CHANGE PLANS. ☐

SUBSEQUENT REPORT OF:

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.

Well Shut-in pending evaluation of use as waterflood well in the future.



STATUS REPORT REQUIRED
EVERY 6 MONTHS ON SHUT-IN
& TEMPORARILY ABANDONED WELLS.

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

SIGNED

[Signature]

TITLE

Vice-President

DATE

May 5, 1987

(This space for Federal or State office use)

APPROVED BY

[Signature]

TITLE

SR. PETROLEUM ENGINEER

DATE

MAY 19 87

CONDITIONS OF APPROVAL, IF ANY: