

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

RECEIVED
NOV 17 1981



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

COLO. OIL & GAS CONS. COM.

5. LEASE DESIGNATION & SERIAL NO.
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
9. WELL NO.
10. FIELD AND POOL, OR WILDCAT
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
12. COUNTY
13. STATE

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 GAS WELL OTHER Dry Hole
2. NAME OF OPERATOR
Bereenergy Corporation
3. ADDRESS OF OPERATOR
2160 First of Denver Plaza, 633-17th Street, Denver, Co. 80202
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1980' FSL & 1920' FWL (NESW) Section 11, T3S, R60W
At proposed prod. zone
same
14. PERMIT NO. 811487
15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4975'GR; 4985'KB

7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
UPRR-Linnebur
9. WELL NO.
1-11
10. FIELD AND POOL, OR WILDCAT
Wildcat
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
11-3S-60W
12. COUNTY
Adams
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 <input type="checkbox"/>	PULL OR ALTER CASING <input 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 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 October 31, 1981 * Must be accompanied by a cement verification report.

The subject well was plugged and abandoned on the above date as follows:

1. Set 15 sx cement plug in bottom of surface casing 330'-280'.
2. Set a 10 sx cement plug in top of surface casing.
3. Cementing verification from drilling contractor is attached as required.

DVR	
FJP	
HMM	
JAM	
LJD	
RLS	
OBM	

19. I hereby certify that the foregoing is true and correct
SIGNED J. Roy White TITLE Western Operations Manager DATE November 16, 1981

(This space for Federal or State office use)
APPROVED BY [Signature] TITLE DIRECTOR O & G Cons. Comm. DATE NOV 19 1981
CONDITIONS OF APPROVAL, IF ANY: