



(001-08662) RECEIVED

API # 05 001 8662 11-1985

File in duplicate
File in triplicate for State lands.

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
Lewis & Clark Exploration Company #50778

3. ADDRESS OF OPERATOR
1580 Lincoln Street, #640, Denver, CO 80203

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface 1780' fsl, 600' fe1
At proposed prod. zone A/A

14. PERMIT NO. 841892

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
GR 4968'

5. LEASE DESIGNATION AND SERIAL NO.
COLO. OIL & GAS CONS. COM.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
UP-AMOCO-COWELL

9. WELL NO.
19-9

10. FIELD AND POOL, OR WILDCAT
Lone Tree

11. SEC., T., R., M., OR B.L.E. AND SURVEY OR AREA
NE SE Sec 19, T3S-R59W

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"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

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) <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.)

Date of work January 19, 1985

1. Logs: Dual-Induction Guard Log; Compensated Density-Dual Spaced Neutron Log.
2. DST's: See Attached
3. Verbal permission to plug from OGCC.
4. Plug: 8-5/8" surface casing at 374', 375 sacks regular 3% calcium chloride.
Plug #1: base of surface with 20 sacks regular.
Plug #2: top of surface with 10 sacks regular.
5. Cement rat and mouse holes.
6. Attached is Kopco Drilling Co. February 1, 1985 acknowledged plugging letter.



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

SIGNED Blenda L. Crawford TITLE Administrative Asst. DATE February 8, 1985

(This space for Federal or State office use)

APPROVED BY William Smith TITLE DIRECTOR DATE FEB 19 1985
CONDITIONS OF APPROVAL, IF ANY: O & G Cons. Comm.

