



00401735

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

5. LEASE DESIGNATION & SERIAL NO.

Fee

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

-

### 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.)

7. UNIT AGREEMENT NAME

-

1. OIL WELL  GAS WELL  OTHER  SI Well

8. FARM OR LEASE NAME

Funk

2. NAME OF OPERATOR  
E. Doyle Huckabay, Ltd.

9. WELL NO.

#5 Funk

3. ADDRESS OF OPERATOR  
1706 Security Life Bldg., 1616 Glenarm Pl. DEN, CO

10. FIELD AND POOL, OR WILDCAT

Lone Tree

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface Sec. 30: NWSE, T3S - R59W

80202

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

NWSE Sec. 30: T3S-R59W

At proposed prod. zone Same

14. PERMIT NO.

77 715

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

5007' Gr - 5013' KB

12. COUNTY

Adams

13. STATE

CO.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other) SI Well

(Other)

(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.

This well is shut-in for possible use as a water disposal well.

RECEIVED

APR 17 1989

OIL & GAS CONS. CO.

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

SIGNED

*[Signature]*

TITLE

General Partner

DATE

4-14-89

(This space for Federal or State office use)

APPROVED BY

*[Signature]*

TITLE

SUPR. PETROLEUM ENGINEER

DATE

5/3/89

CONDITIONS OF APPROVAL, IF ANY:

Oil & Gas Cons. Comm.

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

