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

SEP 10 1997

SUBMIT ORIGINAL AND 1 COPY

FOR OFFICE USE ONLY			
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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.)

<input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER			5 FEDERAL INDIAN OR STATE LEASE NO	
1 NAME OF OPERATOR Tom Brown Inc			6 PERMIT NO	
2 ADDRESS OF OPERATOR 141 Union Blvd Ste 400			7 API NO 05-057-5073	
CITY STATE ZIP CODE Lakewood CO 80228			8 WELL NAME Blevins	
4 LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2340' FSL, 1520' FWL At proposed prod zone Sec11, T9N, R78W			9 WELL NUMBER A-5	
12 COUNTY Jackson			10 FIELD OR WILDCAT Canadian River	
			11 QTR. QTR. SEC., T.R. AND MERIDIAN NESW Sec11, T9N, R78W	

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

13A. NOTICE OF INTENTION TO:

- ☐ PLUG AND ABANDON
- ☐ MULTIPLE COMPLETION
- ☐ COMMINGLE ZONES
- ☐ FRACTURE TREAT
- ☐ REPAIR WELL
- ☐ OTHER _____

13B. SUBSEQUENT REPORT OF:

- ☒ FINAL PLUG AND ABANDONMENT
(SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)
- ☐ ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS)
- ☐ REPAIRED WELL
- ☐ OTHER _____

*Use Form 5 - Well Completion or Recompletion Report and Log
for subsequent report of Multiple/Commingle Completions
and Recompletions

13C. NOTIFICATION OF:

- ☐ SHUT-IN, TEMPORARILY ABANDONED
(DATE _____)
(REQUIRED EVERY 6 MONTHS)
- ☐ PRODUCTION RESUMED
(DATE _____)
- ☐ LOCATION CHANGE (SUBMIT NEW PLAT)
- ☐ WELL NAME CHANGE
- ☐ OTHER _____

14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (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)

15. DATE OF WORK 8/25/97

1. Spot 18 sk cement from 1972' & across perms. Tag at 1840'.
2. Perf 5 1/2" at 360'.
3. Place 40 sk cement in & out of 5 1/2" at 360'.
4. Place 20 sk cement at surface in & out of 5 1/2" casing.
5. Cut off head 4' below GL and weld plate on with well info.

EXHAUSTED
OIL WELL

00271883

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

SIGNED William J. Rippy JrTELEPHONE NO. 970-858-3736NAME (PRINT) BILL RIPPYTITLE ContractorDATE 9/8/97

(This space for Federal or State office use)

APPROVED

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

9/17/97