

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

File in duplicate for Patented
File in triplicate for State land



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 type="checkbox"/> P & A		5. LEASE DESIGNATION & SERIAL NO. State #85/2142-I	
2. NAME OF OPERATOR Caza Exploration Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A	
3. ADDRESS OF OPERATOR 1801 Broadway, Suite #360 Denver, CO 80202		7. UNIT AGREEMENT NAME N/A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Sec. 28: 660'FNL, 660'FWL, T7N-R53W At proposed prod. zone Sec. 28: 660'FNL, 660'FWL, T7N-R53W		8. FARM OR LEASE NAME State	
		9. WELL NO. #1	
		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 28: NW/4 NW/4 T7N - R53W	
14. PERMIT NO. 88-993	15. ELEVATIONS (Show whether DF, RT, GK, etc.) 4,060' GR	12. COUNTY Logan	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 <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Plugged & Abandoned</u>	
(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 10/11/88 * Must be accompanied by a cement verification report.

25 sxs. base 8-5/8" casing across shoe
10 sxs. at surface w/welded plate (4' below surface of ground)

RECEIVED
NOV 02 1988
COLO. OIL & GAS CONS. COMM.



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

SIGNED Michael H. Rubin TITLE President DATE 11/1/88

(This space for Federal or State office use)

APPROVED BY DD TITLE DD DATE 11/4/88

CONDITIONS OF APPROVAL, IF ANY: