



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

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

FOR OFFICE USE			
ET	FE	UC	SE

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 checked="" type="checkbox"/> DRY HOLE		5. LEASE DESIGNATION & SERIAL NO. FEE
2. NAME OF OPERATOR AuraQuest Capital Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 47 W. 200 So. Suite 319		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2564' FEL 1149 FNL NWNE, SEC. 1 At proposed prod. zone		8. FARM OR LEASE NAME Coltharp
14. PERMIT NO. 88-1228		9. WELL NO. C-2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5215' GR		10. FIELD AND POOL, OR WILDCAT Rangely MAUCOS
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 1-1N-102W-6+4 PM
		12. COUNTY Rio Blanco
		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 <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 checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <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.)

Date of work _____

* Must be accompanied by a cement verification report.

Please verify the Plugging & abandonment and forward the \$5,000 bond to AuraQuest. The bond will be applied to a second well in the near future -

Charles.
Dan C. Skeem

Well is plugged
RECEIVED

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

PRINT **DANIEL C. SKEEM**

SIGNED **Daniel C. Skeem** TITLE **PRESIDENT** DATE **4-26-89**

(This space for Federal or State office use)

APPROVED BY _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY

THIS IS NOT ACCEPTABLE. SUBMIT FORM 4 FILLED IN CORRECTLY SHOWING INFORMATION LIKE ATTACHED EXAMPLE. YOU MUST INCLUDE A THIRD PARTY CEMENT VERIFICATION ALSO. THANKS, DAVEE.

A