



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

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.)

1. <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. 43928
2. NAME OF OPERATOR Berenergy Corporation			6. PERMIT NO.
3. ADDRESS OF OPERATOR P. O. Box 5850			7. API NO. 05087 5765
CITY Denver	STATE CO	ZIP CODE 80217	8. WELL NAME Forbes-Marick
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NW NW, 15-T2N-R55W			9. WELL NUMBER 4
At proposed prod. zone Same			10. FIELD OR WILDCAT Zorichak
12. COUNTY Morgan			11. QTR. QTR. SEC., T.R. AND MERIDIAN NW NW, 15-2N-55W

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 _____

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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 _____

Propose to plug and abandon as follows:

- Fill 4-1/2" csg w/sand from PBTD to 10' above top perf (4968-4944'). Set 5 sx cmt plug on top of sand.
- Cut off & recover as much casing as possible.
- Set 15 sx cmt plug across base of 7-5/8" surface casing @ 160'.
- Set 10 sx cmt plug at surface.
- Cut off surface csg 3' below GL & weld on cap.
- Clean up & restore surface to original contour.

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

SIGNED Donn W. Murphy TELEPHONE NO. 303-295-2323
 NAME (PRINT) Donn W. Murphy TITLE Dist. Petr. Engineer DATE 9/26/91

(This space for Federal or State office-use)

APPROVED Ellie B. Bailey TITLE Engineer DATE 10-17-91
 CONDITIONS OF APPROVAL, IF ANY: