

State of Colorado
Oil and Gas Conservation Commission
DEPARTMENT OF NATURAL RESOURCES

FOR OGCC USE ONLY

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NOV 7 1997

SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (back of this form).

1. OGCC Operator Number: 63800	4. Contact Name & Phone
2. Name of Operator: NORTH AMERICAN RESOURCES COMPANY	JEFF REALE
3. Address: 16157 W.C.R. 22	No: (303) 659-7740
City: FORT LUPTON State: CO Zip: 80621	Fax: (303) 857-1259

Complete the
Attachment Checklist

	Oper	OGCC
Survey Plat		
Directional Survey		
Surface Equipment Diagram		
Technical Information Page		
Other		

5. API Number: 05-123-19219	6. OGCC Lease No:
7. Well Name: THOMAS	Number: 7-14
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): SESW Section 7, T1N - R68W 6th PM	
9. County: WELD	10. Field Name: WATTENBERG
11. Federal, Indian or State lease number:	

General Notice

12. ☐ Change well name from _____ to _____ Effective Date: _____

☐ Change of location from _____ to _____
Attach new survey

☒ Abandoned Location. Is site ready for inspection? ☒ Yes ☐ No Effective Date: 11-6-97
Was location ever built? ☐ Yes ☒ No Permit No: 916-072

☐ Well first shut in or temporarily abandoned _____
Has production equipment been removed from site? ☐ Yes ☐ No
MIT required if shut in longer than two years. Date of last MIT: _____

☐ Well resumed production on _____

☐ Request for Confidential Status (6 months).

☐ Final reclamation will commence approximately on _____

☐ Final reclamation is completed and site is ready for inspection. Attach technical page describing final reclamation procedures per Rule 1000c.4.

☒ Change of Operator (prior to drilling). Effective Date: 5/01/97 Plugging bond: ☒ Blanket ☐ Individual

☐ Spud Date _____

Technical Engineering/Environmental Notice

13. ☐ Notice of Intent ☐ Report of Work Done
Approximate Start Date: _____ Date Work Completed: _____

Details of work must be described in full on Technical Information Page (Page 2 must be submitted).

<input type="checkbox"/> Commingle Zones <input type="checkbox"/> Intent to Recomplete (Submit Form) <input type="checkbox"/> Change Drilling Plans <input type="checkbox"/> Reservoir Stimulation <input type="checkbox"/> Perforating/Perfs Added <input type="checkbox"/> Gross Interval Changed? <input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Request to Vent or Flare <input type="checkbox"/> Repair Well <input type="checkbox"/> Convert Well to Injection (in an Approved Secondary Project) <input type="checkbox"/> Additional Source Leases for Water Disposal Well <input type="checkbox"/> Other: _____	<input type="checkbox"/> E&P Waste Disposal <input type="checkbox"/> Beneficial Reuse of E&P Waste <input type="checkbox"/> New Pit <input type="checkbox"/> Landfarming <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases
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I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name JEFF REALE

Signed _____ Title: SENIOR OPERATIONS SUPERINTENDENT Date: November 6, 1997

OGCC Approved: _____ Title: _____ Date: 11-13-97

CONDITIONS OF APPROVAL, IF ANY: