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

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

**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 checked="" type="checkbox"/> OTHER <input type="checkbox"/> <b>Dry Hole</b>		5. LEASE DESIGNATION AND SERIAL NO. <b>Fee</b>
2. NAME OF OPERATOR <b>Webb Resources, Inc.</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <b>2200 First of Denver Plaza Denver, Colorado 80202</b>		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 <b>1980' FWL, 660' FSL, C-SE<math>\frac{1}{4}</math>SW<math>\frac{1}{4}</math> Section 4</b> At proposed prod. zone		8. FARM OR LEASE NAME <b>Larson</b>
14. PERMIT NO. <b>77-974</b>	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>5425' KB 5414' GL</b>	9. WELL NO. <b>4-14</b>
		10. FIELD AND POOL, OR WILDCAT <b>Wildcat</b>
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 4-T3S-R64W</b>
		12. COUNTY <b>Adams</b>
		13. STATE <b>Colorado</b>

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) <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 October 19, 1977

1. The above referenced well was Plugged and Abandoned as follows:

Plug #1	1620-1400'	75 sxs.
Plug #2	209- 131	15 sxs.
Plug #3	Surface	10 sxs.

- No junk was left in the hole.
- 5 jts. of 8-5/8", 24# Exeter casing (198'), was left cemented at 209' KB to 3' below GL, where casing was cut off at abandonment.
- Properties of mud left in hole: Weight: 9.8#/gal; Viscosity 100 sec/qt; Fluid Loss: 8.2 cc.
- Copies of Exeter's letter confirming the plugging procedures are attached.

DVR	<input checked="" type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HMM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
RLS	<input type="checkbox"/>
CGM	<input type="checkbox"/>

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

SIGNED L. E. Penner TITLE Manager of Operations DATE 10/27/77

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE NOV 3 1977  
O & G CONS. COMM.

CONDITIONS OF APPROVAL, IF ANY: