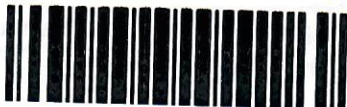


21-10388



99999999

OF COLORADO
SERVATION COMMISSION
NATURAL RESOURCES

Patented and Federal lands.
State lands.

FOR OFFICE USE			
ET <input checked="" type="checkbox"/>	FE <input checked="" type="checkbox"/>	UC <input type="checkbox"/>	SE <input type="checkbox"/>

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.	
2. NAME OF OPERATOR Patrick A. Doheny Operator 24500		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 136 El Camino, Suite 401, Beverly Hills, CA 90212-2781		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 2040' FEL & 2040' FSL (NW/4 SE/4) Section 14 At proposed prod. zone Approximately the same.		8. FARM OR LEASE NAME Basler	
14. PERMIT NO. 88-974		9. WELL NO. 1-E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4482.5' GR 4492' KB		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 14, T2N, R54W	
		12. COUNTY Washington	13. STATE Colorado

SCANNED

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"/>	

(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 October 12, 1988

* Must be accompanied by a cement verification report.

Spudded: October 7, 1988.
 Surface Casing: 8-5/8", 24#, cemented at 100' KB with 60 sacks.
 Plugged: October 12, 1988.
 Procedure: A surface pipe plug was used with 5 sacks at the top and 25 sacks on the bottom of the surface casing. Permission to plug was granted by Mr. Vaclavick, Colorado Oil and Gas Commission.

RECEIVED
 NOV 18 1988
 COLO. OIL & GAS CONS. COMM

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

PRINT Richard E. Ebener
 SIGNED [Signature] TITLE Agent DATE November 8, 1988



00066769

(This space for Federal or State office use)

SUPR. PETROLEUM ENGINEER
Oil & Gas Cons. Comm

APPROVED BY [Signature] TITLE _____ DATE NOV 29 1988
 CONDITIONS OF APPROVAL, IF ANY: _____