



State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109



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JUN 20 03

COGCC



01157034

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 (Page 2 of this form). Identify well or other facility by API Number or by OGCC Facility ID.

Complete the Attachment Checklist

Oper OGCC

Survey Plat	
Direction of Survey	
Surface Equipment Diagram	
Technical Information Page	
Other	

1. OGCC Operator Number: 22755
 2. Name of Operator: Edward Mike Davis
 3. Address: 5177 Richmond Ave, Suite 740
 City: Houston State: TX Zip: 77056
 4. Contact Name and Telephone: Steve Chamberlain
 No: 713-629-9550
 Fax: 713-629-4364

5. API Number: 05-121-16633 6. OGCC Facility ID Number: _____
 7. Facility Name: CHRISTIANSON 1-13 Operator's Facility Number _____
 8. Location (QtrQtr, Sec, Twp, Rng, Meridian): SE1/4, Sec 13, T 35S-R 50W, 6th P.M.
 9. County: Washington 10. Field Name: 99999 (wildcat)
 11. Federal, Indian or State Lease Number: _____

12

General Notice

Change well name and number from: _____ to: _____ Effective Date: _____

Change of location from (QtrQtr, Sec, Twp, Range, Meridian): _____
 Footage from Ext. Sec. Lines: _____
 Change of location to (QtrQtr, Sec, Twp, Range, Meridian): _____
 ATTACH NEW SURVEY Footage from Ext. Sec. Lines: _____

Abandoned Location: Is site ready for inspection? Yes No Date Ready for Inspection: 4/9/2003
 Was location ever built? Yes No

Date 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: _____

Request for Confidential Status (6 months from date of well completion).

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 1004.

Change of Operator (prior to drilling): Effective Date: _____ Plugging bond Blanket Individual

Spud Date _____

13

Technical Engineering/Environmental Notice

Notice of Intent Approximate Start Date: _____ Report of Work Done 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 2) <input type="checkbox"/> Change Drilling Plans <input type="checkbox"/> Reservoir Stimulation <input type="checkbox"/> Perforating/Perfs Added 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 <input type="checkbox"/> Variance
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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: Steve Chamberlain
Signed: Steve Chamberlain Title: AGENT Date: 4/9/2003

OGCC Approved: Col D Matthea Title: Engineer Date: 10/1/03

CONDITIONS OF APPROVAL, IF ANY:



Page 2

TECHNICAL INFORMATION PAGE

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COGCC

1. OGCC Operator Number: 22755 API Number: 05-121-10633
 2. Name of Operator: Edward Mike Davis
 3. Well Name: CHRISTIANSON Well Number: 1-13
 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): SE1/4, Sec 13, T 35-R 50W, 64NPM

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

6

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

CONCERNING the above well, on 1-15-01 the location was back filled and the pit closed. Also the location was reseeded, fertilized and straw placed thereon to the surface owner's satisfaction.