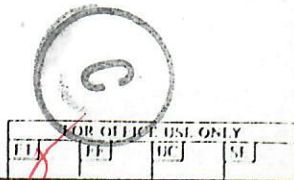




STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

SUBMIT ORIGINAL AND 1 COPY *None*



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.
2. NAME OF OPERATOR GOLD KING PETROLEUM COMPANY		6. PERMIT NO. 830854
3. ADDRESS OF OPERATOR 2112 HURD DRIVE		7. API NO. 051156045
CITY STATE ZIP CODE IRVING, TEXAS 75038		8. WELL NAME STATE
4. LOCATION OF WELL. (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FSL & 1320' FWL At proposed prod. zone		9. WELL NUMBER 4
12. COUNTY SEDGWICK		10. FIELD OR WILDCAT MARKS BUTTE NORTH
		11. QTR. QTR. SEC., T.R. AND MERIDIAN C S/2 OF SW/4 SECTION 12-T10N-R47W

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

<p>13A. NOTICE OF INTENTION TO:</p> <p><input type="checkbox"/> PLUG AND ABANDON</p> <p><input type="checkbox"/> MULTIPLE COMPLETION</p> <p><input type="checkbox"/> COMMINGLE ZONES</p> <p><input type="checkbox"/> FRACTURE TREAT</p> <p><input type="checkbox"/> REPAIR WELL</p> <p><input type="checkbox"/> OTHER _____</p>	<p>13B. SUBSEQUENT REPORT OF:</p> <p><input type="checkbox"/> FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)</p> <p><input type="checkbox"/> ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS)</p> <p><input type="checkbox"/> REPAIRED WELL</p> <p><input type="checkbox"/> OTHER _____</p> <p><i>*Use Form 5 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingle Completions and Recompletions</i></p>	<p>13C. NOTIFICATION OF:</p> <p><input checked="" type="checkbox"/> SHUT-IN/TEMPORARILY ABANDONED (DATE <u>2/90</u>) (REQUIRED EVERY 6 MONTHS)</p> <p><input type="checkbox"/> PRODUCTION RESUMED (DATE _____)</p> <p><input type="checkbox"/> LOCATION CHANGE (SUBMIT NEW PLAT)</p> <p><input type="checkbox"/> WELL NAME CHANGE</p> <p><input type="checkbox"/> OTHER _____</p>
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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 _____

WELL CAPABLE OF PRODUCING , BUT UNECONOMICAL AT THE PRESENT PRICES.

RECEIVED

JUN 26 1992

COLO. OIL & GAS CONS. COMM.

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

SIGNED Vincent Foster TELEPHONE NO. 214-550-9000

NAME (PRINT) VINCENT FOSTER TITLE ENGINEER DATE JUNE 24, 1992

(This space for Federal or State office use)

APPROVED [Signature] TITLE _____ DATE 7/17/92

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

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