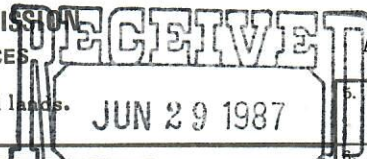




00261372

STATE OF COLORADO  
GAS CONSERVATION COMMISSION  
DEPARTMENT OF NATURAL RESOURCES



API No.: 05-115-6002

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

LEASE DESIGNATION & SERIAL NO.  
INDIAN, ALLOTTEE OR TRIBE NAME

**SUNDRY NOTICES AND REPORTS ON WELLS**  
COLORADO OIL & GAS CONSERVATION COMMISSION

(Do not use this form for proposals to drill or to deepen or plug back wells.)  
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR E. Lyle Johnson Inc.		8. FARM OR LEASE NAME Ham	
3. ADDRESS OF OPERATOR 155 South Madison, Suite 200, Denver, Colo. 80209		9. WELL NO. #2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NW/SW Sec. 17, T10N-R47W; 700' FWL, 1980' FSL At proposed prod. zone same		10. FIELD AND POOL, OR WILDCAT Red Lion	
14. PERMIT NO. 67-443		15. ELEVATIONS (Show whether DF, RT, GR, etc.) KB 3900'; GL 3895'	
		12. COUNTY Sedgwick	13. STATE Colo.

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 checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL (Other) <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 July 15, 1987 \* Must be accompanied by a cement verification report.

Casing: 4 1/2", 9.5 lb/ft set at 3840'.  
Perforations: 3551' - 3573'.

- Propose to:
1. Set CIBP at 3400' with 5 sx cement on top.
  2. Place 10 sx cement at top of hole.
  3. Cut off casing 3' below ground level.
  4. Clean up and restore location.

NOTE: No casing will be recovered.

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

Well will be plugged in the winter as per phone call 9/23/87

19. I hereby certify that the foregoing is true and correct  
SIGNED V. W. Mcknab II TITLE Petroleum Engineer DATE June 26, 1987

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE SUPR. PETROLEUM ENGINEER DATE JUL 01 1987  
CONDITIONS OF APPROVAL, IF ANY: