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UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

Form approved Budget Bureau No. 1004-0135 Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO. D-028961

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

7. UNIT AGREEMENT NAME McCallum Unit

8. FARM OR LEASE NAME

9. WELL NO. 56

10. FIELD AND POOL, OR WILDCAT McCallum/Pierre

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 2, T9N, R79W

12. COUNTY OR PARISH Jackson 13. STATE Colorado

1. OIL WELL [X] GAS WELL [] OTHER []

2. NAME OF OPERATOR Conoco Inc.

3. ADDRESS OF OPERATOR 907 N. Poplar Casper, Wyoming 82601

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2,261' FSL & 1,670' FEL, NW/SE

14. PERMIT NO. 72-445

15. ELEVATIONS (Show whether DF, RT, GR, etc.) 8,202' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF [] FRACTURE TREAT [] SHOOT OR ACIDIZE [] REPAIR WELL [] (Other) []

PULL OR ALTER CASING [] MULTIPLE COMPLETE [] ABANDON* [] CHANGE PLANS []

WATER SHUT-OFF [] FRACTURE TREATMENT [] SHOOTING OR ACIDIZING [] (Other) Status Report [X]

REPAIRING WELL [] ALTERING CASING [] ABANDONMENT* []

(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.)*

Drilling operations were suspended 7/11/72 after setting surface casing. Conoco wishes to retain the well in this status pending further engineering and geological evaluation.



Vertical stamp table with checkmarks

BLM, Craig(3) COGCC(2) SCE File

18. I hereby certify that the foregoing is true and correct SIGNED J.C. Thompson TITLE Administrative Supervisor DATE July 23, 1985

(This space for Federal or State office use)

APPROVED BY William Smith TITLE Director DATE AUG 8 1985

*See Instructions on Reverse Side