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CONSERVATION COMMISSION
OF NATURAL RESOURCES
STATE OF COLORADO

for Patented and Federal lands.
for State lands.

RECEIVED

SEP 27 1972

5. LEASE DESIGNATION AND SERIAL NO.
OIL & GAS COMM. COMM.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

So. Beverly Ridge

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 6-T3S-R50W

12. COUNTY

13. STATE

Washington

Colorado

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 GAS WELL OTHER

2. NAME OF OPERATOR
Koch Exploration Company

3. ADDRESS OF OPERATOR
1208 Lincoln Tower Bldg., Denver, Colorado 80203

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface C SW/4 NE/4 Sec. 6-T3S-R50W

At proposed prod. zone

14. PERMIT NO.
72 725

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4557' 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)

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.)

Date of work _____

The well was spudded on September 16, 1972, and plugged and abandoned on September 19, 1972, at a total depth of 4053' with a cement plug from 310' to 250' with 15 sx and, 10 sx at top of surface.

DVR	<input checked="" type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>

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

SIGNED [Signature]

TITLE Exploration Manager

DATE 9/26/72

(This space for Federal or State office use)

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE DIRECTOR
OF NATURAL RESOURCES COMMISSION

DATE OCT 4 1972



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