



STATE OF COLORADO
GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

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

COLORADO OIL & GAS CONSERVATION COMMISSION

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR Diversified Operating Corp.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 1600 Stout St., Suite 1500, Denver, Co. 80202		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface SW SW At proposed prod. zone		8. FARM OR LEASE NAME Kugler (57250) 55942	
		9. WELL NO. #1	
		10. FIELD AND POOL, OR WILDCAT	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 14-7N-58W	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY	13. STATE

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 type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <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 4-09-86 through 5-14-86 * Must be accompanied by a cement verification report.

Ran sand from 6456' to 6250'. Dumped 5 sacks cement on sand. Set 25 sacks cement half in and half out bottom of surface at 190'. Mudded to 28'. Set 10 sacks cement in top. Welded on cap.

EXHAUSTED
OIL WELL

WRS	
REP	
MMH	
JAM	
ROC	
LAR	
CBM	
ED	

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

SIGNED <u>Donnelly</u>	TITLE <u>DONNELLY CASING PULLING CO. President</u>	DATE <u>10-31-86</u>
(This space for Federal or State office use)		
APPROVED BY <u>William R. Smith</u>	TITLE <u>DIRECTOR O & G Cons. Comm.</u>	DATE <u>DEC 12 1986</u>
CONDITIONS OF APPROVAL, IF ANY:		