

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

SUBMIT ORIGINAL AND 1 COPY

MAY 16 1997



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FOR OFFICE USE ONLY			
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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 BATAA OIL, INC.			6. PERMIT NO. 85-492
3. ADDRESS OF OPERATOR 2500 West 29th. Street			7. API NO. 05-123-12415
CITY Greeley,	STATE CO.	ZIP CODE 80631	8. WELL NAME Hinkle
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1920 FSL, 1980 FWL NESW At proposed prod. zone Same 2005'			9. WELL NUMBER 23-5
12. COUNTY Weld			10. FIELD OR WILDCAT Wattenberg
			11. QTR. QTR. SEC., T.R. AND MERIDIAN NESW Sec. 5-T4N-R64W, 6th. P.M.

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

13A. NOTICE OF INTENTION TO: <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> COMMINGLE ZONES <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> OTHER	13B. SUBSEQUENT REPORT OF: <input type="checkbox"/> FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG) <input type="checkbox"/> ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS) <input type="checkbox"/> REPAIRED WELL <input type="checkbox"/> OTHER <small>*Use Form 5 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingle Completions and Recompletions</small>	13C. NOTIFICATION OF: <input type="checkbox"/> SHUT-IN, TEMPORARILY ABANDONED (DATE _____) (REQUIRED EVERY 6 MONTHS) <input type="checkbox"/> PRODUCTION RESUMED (DATE _____) <input type="checkbox"/> LOCATION CHANGE (SUBMIT NEW PLAT) <input type="checkbox"/> WELL NAME CHANGE <input checked="" type="checkbox"/> OTHER Concrete Pit Removal (Production Pit)
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 5-9-97		

Concrete pit on the above referenced location was broken up, removed and backfilled.
Location was then graded.

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

SIGNED Sam Cady TELEPHONE NO. (970) 330-5699

NAME (PRINT) Sam Cady TITLE Compliance DATE 5-14-97

(This space for Federal or State office use)
APPROVED Reviewed John And TITLE EPS DATE 6-9-97

CONDITIONS OF APPROVAL, IF ANY: