

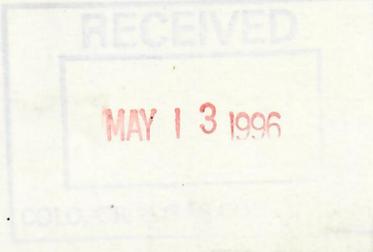


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OGCC FORM 4
Rev. 8/89

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

SUBMIT ORIGINAL AND 1 COPY



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. OIL WELL GAS WELL COALBED METHANE INJECTION WELL OTHER

2. NAME OF OPERATOR
Two J Oil Co

3. ADDRESS OF OPERATOR
Box 329

CITY STATE ZIP CODE
Palisade COLORADO 81526

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface 464' FROM WLINE 2234'
At proposed prod. zone FROM S LINE OF LOT 7 SEC 3 T1N R102W



12. COUNTY RIO BLANCO
11. QTR. QTR. SEC. T.R. AND MERIDIAN NWSW SEC 3 T1N 102W 6 T4PM

5. FEDERAL/INDIAN OR STATE LEASE NO. STATE

6. PERMIT NO. 81-603

7. API NO. 05-103-8716

8. WELL NAME Auth - Amco

9. WELL NUMBER 31

10. FIELD OR WILDCAT Rangely

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

- 13A. NOTICE OF INTENTION TO:
- PLUG AND ABANDON
 - MULTIPLE COMPLETION
 - COMMINGLE ZONES
 - FRACTURE TREAT
 - REPAIR WELL
 - OTHER _____

- 13B. SUBSEQUENT REPORT OF:
- FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)
 - ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS)
 - REPAIRED WELL
 - OTHER
- *Use Form 5 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingled Completions and Recompletions

- 13C. NOTIFICATION OF:
- SHUT-IN/TEMPORARILY ABANDONED (DATE _____) (REQUIRED EVERY 6 MONTHS)
 - PRODUCTION RESUMED (DATE _____)
 - LOCATION CHANGE (SUBMIT NEW PLAT)
 - WELL NAME CHANGE
 - OTHER _____

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 _____

we would like to leave this well open. IT PRODUCES SOME GAS, OUR GAS WELL #28 ISN'T PRODUCING ENOUGH TO RUN OUR HEATER AT THE BATTERY. SO WE NEED IT

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

SIGNED JACK K. Willis

TELEPHONE NO. (970) 249-6264

NAME (PRINT) JACK K. Willis TITLE OWNER

DATE 5/7/96

(This space for Federal or State office use)

APPROVED [Signature]
CONDITIONS OF APPROVAL IF ANY:

NORTHWEST AREA ENGINEER

NOV 13 1996

DATE

1. Report production