

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



ORIGINAL

RECEIVED

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

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Plug and abandon		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR Quest Oil Company		6. IF INDIAN ALLOTTEE OR TRIBE NAME	MAR 19 1986
3. ADDRESS OF OPERATOR 1580 Lincoln Street, Suite 800, Denver, CO 80203		7. UNIT AGREEMENT NAME	GOLD OIL & GAS CONS. COMM.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NE NE NW-6-9N-52W At proposed prod. zone Same		8. FARM OR LEASE NAME	Richerson
14. PERMIT NO. -		9. WELL NO.	1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) -		10. FIELD AND POOL, OR WILDCAT	W. Padroni
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	6-9N-52W
		12. COUNTY	Logan
		13. STATE	Colorado

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 11-18-85 to 11-26-85 * Must be accompanied by a cement verification report.

11/18 -11/19/85 Pulled and laid down rods and tubing. *ls # 32528*

11/20 -11/26/85 Ran Sd to 5000'. Dumped 5sx cmt on Sd at 5000'. Pulled csg, 115 total joints. Set 20 sx cmt at base of surf. Mudded surf. pipe to 35'. Set 10 sx cmt to 4' below ground level. Welded on cap. Well is plugged and abandoned.

WRB	
FJP	
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
ROC	<input checked="" type="checkbox"/>
LAR	<input checked="" type="checkbox"/>
CCM	
SD	

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

SIGNED John H. Utz TITLE Agent DATE 3/10/86

(This space for Federal or State office use)

APPROVED BY William R. Smith TITLE DIRECTOR O & G Cons. Comm. DATE MAR 25 1986

CONDITIONS OF APPROVAL, IF ANY:

H

