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STATE OF COLORADO
GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

SUBMIT ORIGINAL AND 1 COPY

CONFIDENTIAL

| | | | |
|---------------------|----|----|----|
| FOR OFFICE USE ONLY | | | |
| ET | FE | UC | SE |

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.)

5. FEDERAL, INDIAN OR STATE LEASE NO.

1. ☐ OIL WELL ☐ GAS WELL ☐ COALBED METHANE ☐ INJECTION WELL ☒ OTHER Dry Hole6. PERMIT NO.
911116

2. NAME OF OPERATOR

Leede Oil & Gas, Inc.

3. ADDRESS OF OPERATOR

2100 Plaza Tower One
6400 S. Fiddler's Green Cr.

CITY STATE ZIP CODE

Englewood, CO 80111

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)

At surface

1500' FEL & 1920' FSL

At proposed prod. zone

RECEIVED

DEC

COLO. OIL & GAS CONS. COMM.

Kiowa

7. API NO.

05 061 6622 ✓

8. WELL NAME

Barnes

9. WELL NUMBER

1-31

10. FIELD OR WILDCAT

Jace

11. QTR. QTR. SEC., T.R. AND MERIDIAN

NW SE

31-T17S-R41W 6th PM

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 reports of Multiple/Commingle 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 12/03/91

TIH to 2000', Set plug #1 @ 2000' 40 sx standard wt 15.6 yield 1.18. Set plug #2 @ 1200' 40 sx standard wt 15.6 yield 1.18. Set plug #3 @ 378' 40 sx standard wt 15.6 yield 1.18. Set plug #4 @ 35' to surface with 10 sx standard wt 15.6 yield 1.18. Cut off 8 5/8" casing 4' below ground level and welded on plate. Left 8 5/8" surface casing in the hole. The pipe was set at 376'. See attached copy of the job log. The plugging procedures were received from Dave Shelton @ COGCC on 12/02/91.

NOT DONE
AS OF 12/18/91**CONFIDENTIAL**CALLED
ROXANE
1/9/92

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

SIGNED

NAME (PRINT) Roxane I. Apple

TITLE Operations Assistant

TELEPHONE NO. (303) 721-8000

DATE 12/30/91

(This space for Federal or State office use)

APPROVED

TITLE

CONDITIONS OF APPROVAL, IF ANY:



00624639

DATE 1-9-92

① COMPLETE HIGHLIGHTED STEPS

② COMMISSION SHOULD HAVE BEEN NOTIFIED OF MORROW SAND
DEVELOPMENT ~ BOTTOM HOLE. PLUG SHOULD HAVE BEEN SET