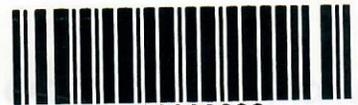


(001-26314)

OGCC FORM 4

OIL AND GAS CONSERVATION



99999999

SION

RECEIVED

AUG 11 1971

REV. 7-64

OF THE STATE OF COLORADO

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

COLO. OIL & GAS CONS. COMM.

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 checked="" type="checkbox"/> Dry Hole		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR Edward Mike Davis d/b/a Tiger Oil Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 1810 First National Bank Building, Denver, Colorado		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 NWSW At proposed prod. zone		8. FARM OR LEASE NAME Noonen-State
14. PERMIT NO. 71-529		9. WELL NO. 1-34
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5001 KB		10. FIELD AND POOL, OR WILDCAT Poncho
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 34-3S-59W
		12. COUNTY Adams
		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 checked="" 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) _____	

(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.)

Date of work 7/29/71

Plugged as follows: ✓

30 sacks 6000-6018
60 sacks 110- 300
10 sacks Top of surface casing

DVR	<input type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>

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

SIGNED *Ferry Brandy* TITLE _____ DATE 8/9/71

(This space for Federal or State office use)

APPROVED BY *W. Rogers* TITLE **DIRECTOR** DATE AUG 16 1971

CONDITIONS OF APPROVAL, IF ANY:



00416673

X