

P+A

PCC

WELL SITE INSPECTION

OPERATOR Viking Res + Enter
WELL NAME State-Williams 24-36
RIG Enter

PERMIT NO 88-1364
DATE May 21 1985
COUNTY Logan
LEGAL SE 1/4 S 36 T 12 N R 54 W

SURFACE CASING SIZE 8 5/8 DEPTH 409 DATE 9/81

CEMENT VOLUME _____ RETURNS _____ WOC _____

PROBABLE FOX HILLS DEPTH _____

MUD PITS _____

DISPOSAL _____

PRODUCTION STRING _____ SIZE _____ DEPTH _____

STAGED _____ CBL CHECKED _____

SQUEEZE _____ FRAC JOB _____

BATTERY _____ SIGN _____

SITE INSPECTION AFTER DRILLING _____

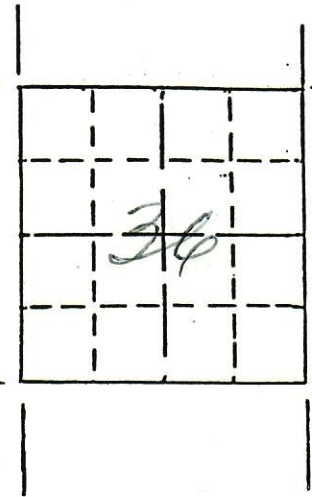
No evidence of well site

DIRECTIONS _____

ACTION _____



ENGINEER DB Brinknell



7/4

STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCESFile 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"/>		5. LEASE DESIGNATION & SERIAL NO. 80-5048-S	
2. NAME OF OPERATOR Viking Resources Corporation and Exeter Drilling Northern, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 1675 Broadway, Suite 2750, Denver, CO 80202		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 660' FSL - 1980' FWL At proposed prod. zone		8. FARM OR LEASE NAME State-Williams	
14. PERMIT NO. 80-1364		9. WELL NO. 24-36	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4669 GR		10. FIELD AND POOL, OR WILDCAT	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SE/4SW/4, 36-12N-54W	
		12. COUNTY Logan	13. STATE CO

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON

REPAIR WELL.

CHANGE PLANS:

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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REPAIRING WELL

ALTERING CASING

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

ABANDONMENT*

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☐

(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.)

18. Date of work September 5, 1981 - P&A

* Must be accompanied by a cement verification report.

Plugged well with 20 sacks at 409'. Put 10 sacks on surface. Rig released at 3:45 on September 5, 1981.

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

SIGNED

VIKING RESOURCES CORPORATION
By: Kenneth A. Milliard

TITLE

General Manager

DATE

May 10, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: