

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



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.)

|   |
|---|
| 5. LEASE DESIGNATION & SERIAL NO.<br>Fee                        |
| 6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br>-----                   |
| 7. UNIT AGREEMENT NAME<br>-----                                 |
| 8. FARM OR LEASE NAME<br>Amoco                                  |
| 9. WELL NO.<br>43-27  |
| 10. FIELD AND POOL, OR WILDCAT<br>Noonen Ranch                  |
| 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>27-T3S-R59W |
| 12. COUNTY<br>Adams   |
| 13. STATE<br>CO   |

|  |
|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>   |
| 2. NAME OF OPERATOR<br>E. Doyle Huckabay, Ltd.   |
| 3. ADDRESS OF OPERATOR<br>1706 Security Life Bldg., Denver, CO 80202   |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)<br>At surface Sec. 27: 660' FEL, 1940' FSL, T3S, R59W<br>At proposed prod. zone<br>Same as surface |
| 14. PERMIT NO.<br>05 001 8727  |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>5093' GR   |

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 type="checkbox"/>    |
| REPAIR WELL, (Other) <input type="checkbox"/> | CHANGE PLANS <input checked="" type="checkbox"/> | (Other) <input type="checkbox"/>               |  |

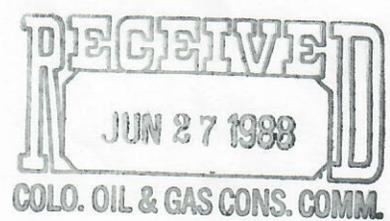
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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 07-18-88 \* Must be accompanied by a cement verification report.

Run sand from 6283 to 6183. Dump 5 sks. cement on sand. Fill hole with mud. Fill hole with mud. Cut 5 1/2" casing off at 3500'. Pump 35 sks cement in & out of 9-5/8" surface pipe set @ 375', set surface plug of 5 sks. Cut off casing 4' below surface, weld on plate.

FOR OFFICE USE ONLY  
FT  
JL  
UC  
SP



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

SIGNED Nath L. Goodwin TITLE Agent DATE 06-23-88

(This space for Federal or State office use)

APPROVED BY J. A. [Signature] TITLE SUPR. PETROLEUM ENGINEER DATE JUL 05 1988  
Oil & Gas Cons. Comm.

CONDITIONS OF APPROVAL, IF ANY: