

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

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

RECEIVED  
DEC 13 1985  
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.)

5. LEASE DESIGNATION AND SERIAL NO. Fee
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME Dawson
9. WELL NO. #6
10. FIELD AND POOL, OR WILDCAT Brandon
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SwNe Sec 8 T19S-R45W
12. COUNTY Kiowa
13. STATE Colorado

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Inexco Oil Company

3. ADDRESS OF OPERATOR  
1860 Lincoln Street, Suite 500 Denver, CO 80295

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface  
1980 FNL & 1980 FEL Sec 8 T19S-R45W  
At proposed prod. zone  
As Above

14. PERMIT NO.  
71-318

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3873' GR

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

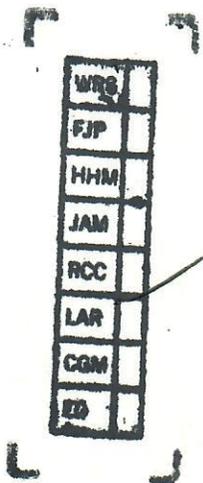
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	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 <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	
(Other) _____	Shut-In <input checked="" 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.)

Date of work \_\_\_\_\_

Well was Shut-In - Uneconomic December, 1980. Lease is HBP



18. I hereby certify that the foregoing is true and correct  
SIGNED W.R. Finnett TITLE Division Operations Manager DATE 12/6/85

(This space for Federal or State office use)  
APPROVED BY William Smith TITLE DIRECTOR DATE DEC 17 1985  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

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