



OGCC FORM 4
Rev 8/89

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

SUBMIT ORIGINAL AND 1 COPY

FOR OFFICE USE ONLY
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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.)

<input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER			5. FEDERAL, INDIAN OR STATE LEASE NO.
1. NAME OF OPERATOR K N Production Company			6. PERMIT NO. 90 808
2. ADDRESS OF OPERATOR P.O. Box 281304			7. API NO. 05 071 6164
CITY Lakewood	STATE Colorado	ZIP CODE 80228	8. WELL NAME Apache Canyon
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 800' FNL and 1785' FEL At proposed prod. zone As Above			9. WELL NUMBER 30--2
12. COUNTY Las Animas			10. FIELD OR WILDCAT Apache Canyon
			11. QTR. QTR. SEC., T.R. AND MERIDIAN NW NE 30-33S-67W-6th P.

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 report of Multiple Commingled Completions and Recompletions

13C. NOTIFICATION OF:

- SHUT-IN TEMPORARILY ABANDONED (DATE 10/12/91) (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 October 12, 1991

SWI pending economic evaluation of pipeline project.

**STATUS REPORT REQUIRED
EVERY 6 MONTHS ON SHUT-IN
& TEMPORARILY ABANDONED WELLS**

RECEIVED

NOV 9 1991

COLO. OIL & GAS CONS. COMM.

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

SIGNED Dana K. Greathouse

TELEPHONE NO. (303) 980-9340

NAME (PRINT) Dana K. Greathouse TITLE Engineering Technician

DATE 10/31/91

(This space for Federal or State office use)

APPROVED EBB TITLE _____

DATE 3-27-92

CONDITIONS OF APPROVAL, IF ANY: