

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.

**RECEIVED**  
**MAR 20 1987**  
**COLO. OIL & GAS CONS. COMM.**

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		3. LEASE DESIGNATION & SERIAL NO. C01-752	
2. NAME OF OPERATOR Inexco Oil Company		6. INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 1560 Broadway, Suite 1200, Denver, Colorado 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 150' NW of NESW, Sec. 12-T16S-R45W At proposed prod. zone Same		8. FARM OR LEASE NAME Lowe	
14. PERMIT NO. 69404		9. WELL NO. 4-X	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4353' GL		10. FIELD AND POOL, OR WILDCAT Golden Spike	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW of NESW, Sec. 12-16S-45W	
		12. COUNTY Cheyenne	
		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 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) <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 \_\_\_\_\_ \* Must be accompanied by a cement verification report.

The above referenced well is currently shut-in pending an improvement in the petroleum market.

FOR OFFICE USE ONLY

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*Jan*

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

SIGNED *Rick L. Kirby* TITLE Sr. Petroleum Engineer DATE 03/18/87

(This space for Federal or State office use)

APPROVED BY *[Signature]* TITLE SUPR. PETROLEUM ENGINEER DATE MAR 24 1987

CONDITIONS OF APPROVAL, IF ANY:

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