

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 type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input checked="" type="checkbox"/> OTHER <u>DRY HOLE</u>		FEDERAL INDIAN OR STATE LEASE NO.	
1 NAME OF OPERATOR <u>Edward Mike Davis</u>		6 PERMIT NO. <u>951002</u>	
2 ADDRESS OF OPERATOR <u>800 W. Sam Houston Parkway S. Suite 133</u>		7 API NO. <u>050759302</u>	
CITY <u>HOUSTON, TEXAS</u> STATE <u>TEXAS</u> ZIP CODE <u>77042</u>		8 WELL NAME <u>13-31 Bollish</u>	
4 LOCATION OF WELL (Report location clearly and in accordance with any State requirements See also space 17 below.) At surface <u>1980' FSL &amp; 800' FWL</u>		9 WELL NUMBER	
At proposed prod. zone		10 FIELD OR WILDCAT <u>Wildcat</u>	
12 COUNTY <u>LOGAN</u>		11 QTR QTR SEC TR AND MERIDIAN <u>NW SW Sec 31, T9N, R. 52W</u>	

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 1RD 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 reports of Multiple Commingled Completions  
and Recompletions

## 13C NOTIFICATION OF:

- ☐ SHUT-IN TEMPORARILY ABANDONED  
(DATE \_\_\_\_\_)  
(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 1-2-96

PLUG 1 Set 40 SX 4820' - 4670'

PLUG 2 Set 10 SX 40' To Surface

SURFACE PIPE WAS CUT OFF 6' BELOW SURFACE & WELD PLATE OVER THE TOP.

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

SIGNED Steve Chamberlain  
NAME (PRINT) Steve Chamberlain TITLE AGENTTELEPHONE NO (713) 629-9550DATE 1-19-96

(This space for Federal or State office use)

APPROVED NOT APPROVED  
CONDITIONS OF APPROVAL, IF ANY

TITLE

DATE

THE WELL WAS TO BE PLUGGED W/ 40 SX  
1/2 IN AND 1/2 OUT OF SURFACE CASING 5HGS.