

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>		1 FEDERAL INDIAN OR STATE LEASE NO.	
2 NAME OF OPERATOR <u>Edward Mike Davis</u>		6 PERMIT NO. <u>951002</u>	
3 ADDRESS OF OPERATOR <u>800 W. Sam Houston Parkway S. Suite 133</u>		7 API NO. <u>050759302</u>	
CITY STATE ZIP CODE <u>HOUSTON, TEXAS 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 & 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>NWSW 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 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 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 TELEPHONE NO. (713) 629-9550
NAME (PRINT) Steve Chamberlain TITLE AGENT DATE 1-19-96

(This space for Federal or State office use)

NOT APPROVED.

APPROVED _____
CONDITIONS OF APPROVAL, IF ANY

THIS WELL WAS TO BE PLUGGED w/ 40 SX
1/2 IN & 1/2 OUT OF SURFACE CASING SHAPE.

DAVID SILVER