

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.

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR Lifestyle Energy Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 2305 Cedar Springs Rd., Suite 300, Dallas, Tx. 75201		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 1980' FWL & 660' FSL Sec. 24-T3S -R64W At proposed prod. zone 1980' FWL & 660' FLS Sec. 24-T3S-R64W		8. FARM OR LEASE NAME Danford-Champlin	
		9. WELL NO. 2-24	
		10. FIELD AND POOL, OR WILDCAT Bennett	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 24 T3S-R64W 6th PM	
14. PERMIT NO. 80293	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5491 GR	12. COUNTY Adams	13. STATE Colorado

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) temp. aband. ☒

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☒

(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.)

* Must be accompanied by a cement verification report.

18. Date of work _____

8 5/8" 24# set @ 253' cemented with 225 sacks with 3% CaCl₂
4 1/2 11.6# set @ 8072' cemented with 200 sacks 50/50 POZ with 2% gel
2 3/8" 4.7# @ 7707'
Perforations 7946-50' 7954-57'
acidized with 1000 gallons 7 1/2% SHA with 2 gallons I-15
Fracture Treatment 42,000# 20/40 sand 34,000 gallons Apollo 40 gelled water
Set BP @ 7941'
perforations 7932-7936', acidized with 750 gallons 7 1/2% SHA
Fracture treatment 25,500# 20/40 sand 16,000 gallons Apollo 40 gelled water
production estimate 8 BOPD 100 MCFD
production facilities have not been installed

S.I.

FOX-HILLS - 1400 - 1550

This is an approved status
report only.

JSK

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

SIGNED Jack V. Cordaw

TITLE Operations Engr.

DATE 3/24/86

(This space for Federal or State office use)

SUPR. PETROLEUM ENGINEER
Oil & Gas Cons. Comm.

APPROVED BY J. A. [Signature]

TITLE _____

DATE MAR 31 1986

CONDITIONS OF APPROVAL, IF ANY: