



99999999

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTSUBMIT IN TRIPlicate  
(Other instructions on form)  
Form 100-108Budget Bureau No. 100-108-10  
Expires August 31, 1985

## 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. WELL TYPE OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		2. LEASE DESIGNATION AND SERIAL NO. C-8165
3. NAME OF OPERATOR COSEKA RESOURCES (U.S.A.) LIMITED		4. IF INDIAN, ALLOTTEE OR TRIBE NAME
5. ADDRESS OF OPERATOR 1512 Larimer St., Suite 610, Denver, CO 80202		6. UNIT AGREEMENT NAME
7. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1624' FNL & 2399' FWL, Sec. 23-T1N-R103W		8. FARM OR LEASE NAME Federal
9. PERMIT NO. 80-1683		9. WELL NO. 11-23-1-103
10. ELEVATIONS (Show whether OF, BT, GR, etc.) 5473' GL		10. FIELD AND POOL, OR WILDCAT Wildcat
11. SEC. T., R., N., OR BLM. AND SURVEY OR AREA Sec. 23-T1N-R103W		11. COUNTY OR PARISH Rio Blanco
12. STATE Colorado		12. 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 ☐ABANDON OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON ☐CHANGE PLANE ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐ABANDON OR ACIDIZING ☐(Other) Final Abandonment ☒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.)

The subject well has been permanently plugged and abandoned and the surface has been rehabilitated and seeded.

RECEIVED  
NOV 18 1987  
COLO. OIL & GAS CONS. COMM.

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

SIGNED

TITLE

Operations Manager

DATE

11-16-87

(This space for Federal or State office use)

APPROVED BY

TITLE

SUPR. PETROLEUM ENGINEER  
Oil & Gas Cons. Comm.

DATE

NOV 18 1987

CONDITIONS OF APPROVAL, IF ANY:



00046930

See Instruct