

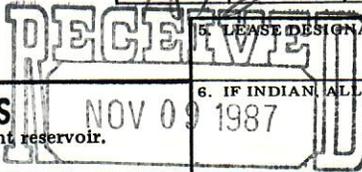
STATE OF COLORADO
OIL AND GAS CONSERVATION COMMIS
DEPARTMENT OF NATURAL RESOURCE



00066559

FOR OFFICE USE		
FE	UC	SE

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry Hole		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR Patrick A. Doheny Operator 24500		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 136 El Camino, Suite 401, Beverly Hills, CA 90212-2781		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 2040' FSL & 810' FWL (NW/4 SW/4) Section 27 At proposed prod. zone Approximately the same.		8. FARM OR LEASE NAME Fassler	
14. PERMIT NO. 87-712		9. WELL NO. 1-27	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4651.7' GR 4662' KB		10. FIELD AND POOL, OR WILDCAT First-One "D"	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 27, T2N, R53W	
		12. COUNTY Washington	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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS: <input type="checkbox"/>	(Other) _____	

(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 October 8, 1987 * Must be accompanied by a cement verification report.

Spudded: October 5, 1987.
Surface Casing: 8-5/8", 24#, cemented at 133' KB with 85 sacks.
Plugged: October 8, 1987.
Procedure: A surface pipe plug was used with 10 sacks at the top and 25 sacks on the bottom of the surface casing. Permission to plug was granted by Mr. Dennis Bicknell, Colorado Oil and Gas Commission.

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

PRINT Richard E. Ebener

SIGNER [Signature] TITLE Agent DATE November 6, 1987

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE SUPR. PETROLEUM ENGINEER DATE NOV 11 1987

CONDITIONS OF APPROVAL, IF ANY:

K