

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Budget Bureau No. 1004-0135

Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry a different reservoir.  
Use "APPLICATION FOR PERMIT -" for such proposals

5. Lease Designation and Serial No.

**C-0128296**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

**Fork Unit 7-10-2-2**

9. API Well No.

**05-103-08642**

10. Field and Pool, or Exploratory Area

**Dragon Trail**

11. County or Parish, State

**Rio Blanco, CO**

**SUBMIT IN TRIPLICATE**

1. Type of Well

<input type="checkbox"/> Oil Well	<input checked="" type="checkbox"/> Gas Well	<input type="checkbox"/> Other
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2. Name of Operator

**Locin Oil Corporation**

3. Address and Telephone No.

Rangely - 970-675-8451

**25231 Grogan's Mill Rd. Suite 500, The Woodlands, TX 77380**

4. Location of Well (Footage, Sec., T., R., m., or Survey Description)

**SWNE Sec 10, T2S, R102W**

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent <input type="checkbox"/> Subsequent Report <input checked="" type="checkbox"/> Final Abandonment Notice	<input checked="" type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input type="checkbox"/> Other _____ <input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

Equipment has been removed and the land recontoured and seeded.

- REALTY \_\_\_\_\_
- PAT \_\_\_\_\_
- PE \_\_\_\_\_
- PET \_\_\_\_\_
- GEO \_\_\_\_\_

*Recommend for AFM approval*  
 NRS BLP 7/16/10  
 AFMSS IN  OUT

MAY 21 2010

Well was plugged on 04/26/02

*PTA status effective 7/21/2010*

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

Signed *M. D. Clavin*

Title **Operations Manager**

Date **05/14/10**

(This space for Federal or State office use)

Approved by *James J. Moore*

Title **ASSOCIATE FIELD MANAGER**  
**White River Field Office-Meeker, CO**

Date **7/24/10**

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.