

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)

1. ( ) OIL WELL ( ) GAS WELL ( ) COALBED METHANE ( ) INJECTION WELL (X) OTHER

2. NAME OF OPERATOR  
UNION PACIFIC RESOURCES COMPANY

3. ADDRESS OF OPERATOR  
PO BOX 7 MS 3006

CITY STATE ZIP CODE  
FORT WORTH TEXAS 76101-0007

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below)

At surface:  
At proposed prod. zone:

12. COUNTY  
Weld

6. FEDERAL INDIAN OR STATE LEASE NO.

NA

PERMIT NO.

NA

7. API NO.

05-123-08847

8. WELL NAME

Schwab 42-13

9. WELL NUMBER

2

10. FIELD OR WILDCAT

Spindle

11. QTR. QTR. SEC. T.R. AND MERIDIAN

SENE Sec. 13-1N-68W

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

13 A. NOTICE OF INTENTION TO:

- ( ) PLUG AND ABANDON
- ( ) MULTIPLE COMPLETION
- ( ) COMINGLE ZONES
- ( ) REPAIR WELL
- ( ) OTHER:

13 B. SUBSEQUENT REPORT OF:

- ( ) FINAL PLUG AND ABANDONMENT  
(SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)
- ( ) ABANDONED LOCATION (WELL NEVER DRILLED. SITE MUST BE RECLAIMED WITHIN 6 MONTHS)
- ( ) REPAIRED WELL
- ( ) OTHER

Use Form 5 - Well Completion or Recompletion Reports and Log for subsequent reports of Multiple/Comingled Completions and Recompletions

13 C. NOTIFICATION OF:

- (X) SHUT-IN TEMPORARILY ABANDONED  
(DATE 09-01-92)  
(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: 9/1/92

This well is temporarily abandoned pending engineer evaluation.

If additional information is needed, please contact the undersigned at (817) 877-6530.

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

SIGNED Cami Cho

TELEPHONE NO. (817) 877-6530

NAME (PRINT) Cami Cho

TITLE: Regulatory Analyst

DATE: 04-19-96

APPROVED [Signature] TITLE REG DATE 4-24-96

CONDITIONS OF APPROVAL, IF ANY: