UNITED STATES SUBMIT IN TRIPLICATE Other instructions on reverse side) **UNITED STATES**

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

SE 079527A

GEOLOGICAL	SURVEY
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	CECECOCICAL SOLVET		01 0//02/10		
	SUNDRY NOTICES AND REPORTS (Do not use this form for proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such p	back to a different reservoir.	6. IF INDIAN, ALLOTTE	E OR TRIBE NAME.	
1.	OIL GAS OTHER		7. UNIT AGREEMENT N	AME	
2.	NAME OF OPERATOR	8. FARM OR LEASE NA	8. FARM OR LEASE NAME		
	Consolidated Oil & Gas, Inc.		Champlin	Champlin	
3.	ADDRESS OF OPERATOR		9. WELL NO.		
	1860 Lincoln Street, Denver, Colo. 80295	#2A	#2A		
4.	LOCATION OF WELL (Report location clearly and in accordance with any See also space 17 below.) At surface	State requirements.*	Blanco Mesav	10. FIELD AND FOOL, OR WILDCAT Blanco Mesaverde 11. SEC., T., R., M., OR BLK. AND SUBVEY OR AREA	
	1090' FSL & 1720' FWL		Sec. 35, T27N	, RAW, MATE	
14.	PERMIT NO. 15. ELEVATIONS (Show whether D	, RT, GR, etc.)	12. COUNTY OR PARIS	H 13. STATE	
	7003' Gr.		Rio Arriba	New Harris	
16.	Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data				
	NOTICE OF INTENTION TO:	UBSEQUENT REPORT OF:	SEQUENT REPORT OF:		
	TEST WATER SHUT-OFF PULL OR ALTER CASING	WATER SHUT-OFF	X REPAIRING	weni.	

FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING REPAIR WELL CHANGE PLANS (Other) (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other)

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.)*

1.21-78 MOL & RU Spud 15" surface hole 6:00 p.m.

1-22-78 Ran 293! of 10 3/4" 32.75# H-40 Rge 3 ST&C csg. and set @ 305! K.B. Cemented w/300 sx C1 "B" w/2% Cacl $_2$ & $\frac{1}{4}$ #/Celloflake per sk. Cmt. Circ. PD 9:30 a.m. WOC 12 hrs. Test csg. to 600 psi for ½ hr.



8. I hereby certify that the foregoing is true and correct	n verkerreiker schade und der er Mak aal		The same of the sa	
SIGNED O.B. Whitenburg	TITLE	Sr. Drilling Engineer	DATE	1-24-78
(This space for Federal or State office (APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE		DATE :	

*See Instructions on Reverse Side

OL BEDEROCKET SURVEY 100 0010.