

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- dry hole		7. Unit Agreement Name
2. Name of Operator NATIONAL OIL COMPANY		8. Farm or Lease Name Ute Anticline
3. Address of Operator 1350 17th Street, Ste 300 Denver, CO 80202		9. Well No. 1
4. Location of Well UNIT LETTER A 660 FEET FROM THE north LINE AND 660 FEET FROM THE east LINE, SECTION 11 TOWNSHIP 12N RANGE 32E N.M.P.M.		10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) GL 4063', KB 4073'		12. County Quay

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

The above mentioned well as plugged in the following manner:

35 sxs @ 2900'
35 sxs @ 2350'
40 sxs @ 1720'
40 sxs @ 1250'
40 sxs @ 700'
10 sxs @ surf

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED R. C. Parker TITLE Operations Manager DATE July 26, 1982

APPROVED BY _____ TITLE _____ DATE _____