

OIL AND GAS CONSERVATION COMMISSION DEPARTMENT OF NATURAL RESOURCES OF THE STATE OF COLORADO

RECEIVED

SEP 13 1973



00224450

File in duplicate for Patented and Federal lands. OIL & GAS CONSERVATION COMMISSION
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 <u>Wildcat</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR <u>TREND EXPLORATION LIMITED</u>		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR <u>600 Capitol Life Center, Denver, Colorado 80203</u>		8. FARM OR LEASE NAME <u>State</u>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <u>1850' NSL, 700' WEL, Sec. 6, T-6-N, R-89-W</u> At proposed prod. zone <u>3070' NSL, 418' EWL, Sec. 5, T-6-N, R-89-W</u>		9. WELL NO. <u>1-6 Sidetrack #1</u>	
14. PERMIT NO. <u>72-748</u>		10. FIELD AND POOL, OR WILDCAT <u>Wildcat</u>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>6332 GR</u>		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>NE 1/4 SE 1/4 Sec. 6, T-6-N, R-89-W</u>	
		12. COUNTY <u>Routt</u>	13. STATE <u>Colorado</u>

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) Shut inPULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON ☐CHANGE PLANS ☐Shut in

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT ☐

(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.)

Date of work _____

Tested well to atmosphere commencing 5-30-73, CP 1300#, TP 1100#. Production declined to less than 10,000 CF/day with small amount condensate. Well would load up and die.

Propose to shut in well for winter and make additional evaluations before doing any additional work.

DVR	
FIP	
WIM	<input checked="" type="checkbox"/>
DM	<input checked="" type="checkbox"/>
DO	<input checked="" type="checkbox"/>

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

SIGNED [Signature]TITLE EngineerDATE Sept. 12, 1973

(This space for Federal or State office use)

APPROVED BY D.V. RogersTITLE DIRECTORDATE SEP 13 1973

CONDITIONS OF APPROVAL, IF ANY: