

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.)		3 FEDERAL/INDIAN OR STATE LEASE NO.
1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER		6. PERMIT NO. 8791061
2. NAME OF OPERATOR Cockrell Oil Corporation		7. API NO. 05-081-6710
3. ADDRESS OF OPERATOR 1600 Smith St. Suite 4600 CITY STATE ZIP CODE Houston, Texas 77002-7348		8. WELL NAME Stelbar-Scott
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1850' FNL & 1650' FEL At proposed prod. zone <i>same</i>		9. WELL NUMBER No. 1
12 COUNTY Moffat		10. FIELD OR WILDCAT Wildcat
		11. QTR. QTR. SEC., T.R. AND MERIDIAN SW/4 NE/4 Sec. 17 T7N R91W

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

<p>13A. NOTICE OF INTENTION TO:</p> <p><input type="checkbox"/> PLUG AND ABANDON</p> <p><input type="checkbox"/> MULTIPLE COMPLETION</p> <p><input type="checkbox"/> COMMINGLE ZONES</p> <p><input type="checkbox"/> FRACTURE TREAT</p> <p><input type="checkbox"/> REPAIR WELL</p> <p><input type="checkbox"/> OTHER _____</p>	<p>13B. SUBSEQUENT REPORT OF:</p> <p><input checked="" type="checkbox"/> FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)</p> <p><input type="checkbox"/> ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS)</p> <p><input type="checkbox"/> REPAIRED WELL</p> <p><input type="checkbox"/> OTHER</p> <p><small>*Use Form 5 - Well Completion or Recompletion Reports and Log for subsequent reports of Multiple/Commungled Completions and Recompletions</small></p>	<p>13C. NOTIFICATION OF:</p> <p><input type="checkbox"/> SHUT-IN, TEMPORARILY ABANDONED (DATE _____) (REQUIRED EVERY 6 MONTHS)</p> <p><input type="checkbox"/> PRODUCTION RESUMED (DATE _____)</p> <p><input type="checkbox"/> LOCATION CHANGE (SUBMIT NEW PLAT)</p> <p><input type="checkbox"/> WELL NAME CHANGE</p> <p><input type="checkbox"/> OTHER _____</p>
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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 August 16, 1992

Set 5-1/1" cement retainer at 4885'. Set 150' (16sx) cement plug from 4885-4735' and 55' (6sx) cement plug at surface. Cut off wellhead four feet below GL and weld on plate.

RECEIVED

SEP 14 1992

COLO. OIL & GAS CONS. COMM.

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

SIGNED *B. E. Weichman* TELEPHONE NO. 713-651-1271

NAME (PRINT) B. E. Weichman TITLE Special Projects Manager DATE 9-8-92

(This space for Federal or State office use)

APPROVED *[Signature]* TITLE Sr. Petroleum Engineer DATE OCT 13 1992
O & G Conservation Commission

