

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL 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—" for such proposals.)

1. OIL <input type="checkbox"/> WELL GAS <input checked="" type="checkbox"/> WELL <input checked="" type="checkbox"/> OTHER Location		7. UNIT AGREEMENT NAME COLO. OIL & GAS CONSV. COM.	
2. NAME OF OPERATOR C & K Petroleum, Inc.		8. FARM OR LEASE NAME Federal	
3. ADDRESS OF OPERATOR 1700 Colorado State Bank Bldg., Denver, Colorado 80202		9. WELL NO. 1-22	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 410' FNL; 910' FEL Sec. 22		10. FIELD AND POOL, OR WILDCAT Blue Gravel	
14. PERMIT NO. 75-83		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6,823' Gr	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22-T9N-R91W	
		12. COUNTY OR PARISH Moffat	
		13. STATE Colorado	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	(Other) <input type="checkbox"/>	

(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.)\*

Move location at request of U.S.G.S. and B.L.M. to minimize enviromental impact  
(location was 660' FN & E L).

DVR	
FIP	✓
HHM	✓
JAM	✓
JID	✓
GCH	
CGM	✓

cc: 2 - Colorado Oil & Gas Conservation Commission  
2-- Bureau of Land Management, Craig, Colorado  
2 - Moffat County Planning Department

Elevation Plat attached  
to all copies

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

SIGNED GEORGE E. FARMAR  
George E. Farmar

TITLE Division Operations Manager DATE March 3, 1975

(This space for Federal or State office use)

APPROVED BY [Signature]  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

MAR 11 1975

\*See Instructions on Reverse Side

*[Handwritten signature]*