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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.)

5 FEDERAL/INDIAN OR STATE LEASE NO.

Fee

6 PERMIT NO

79-744

7. API NO.

05-073-06082

8 WELL NAME

State 1-36

9. WELL NUMBER

1

10. FIELD OR WILDCAT

Wildcat

11. QTR. QTR. SEC., T.R. AND MERIDIAN

CNW
Section 36-11S-52W☐ OIL WELL ☐ GAS WELL ☐ COALBED METHANE ☐ INJECTION WELL ☒ OTHER Shut In

2 NAME OF OPERATOR

Union Pacific Resources Company

3 ADDRESS OF OPERATOR

P. O. Box 7 - MS 3407

CITY

STATE

ZIP CODE

Fort Worth, Texas 76101-0007

4 LOCATION OF WELL (Report location clearly and in accordance with any State requirements
See also space 17 below.)

At surface

1320' FWL & 1320' FNL

At proposed prod. zone

Straight Hole

12 COUNTY

Lincoln

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

13A. NOTICE OF INTENTION TO:

- ☐ PLUG AND ABANDON
- ☐ MULTIPLE COMPLETION
- ☐ COMMINGLE ZONES
- ☐ FRACTURE TREAT
- ☐ REPAIR WELL
- ☐ OTHER

13B. SUBSEQUENT REPORT OF:

- ☐ FINAL PLUG AND ABANDONMENT
(SUBMIT 3RD PARTY CEMENT VERIFICATION
AND JOB LOG)
- ☐ ABANDONED LOCATION (WELL NEVER DRILLED -
SITE MUST BE RESTORED WITHIN 6 MONTHS)
- ☐ REPAIRED WELL
- ☐ OTHER

**Use Form 5 - Well Completion or Recompletion Report and Log
for subsequent report of Multiple/Commingle Completions
and Recompletions*

13C. NOTIFICATION OF:

- ☐ SHUT-IN, TEMPORARILY ABANDONED
(DATE _____)
(REQUIRED EVERY 6 MONTHS)
- ☐ PRODUCTION RESUMED
(DATE _____)
- ☐ LOCATION CHANGE (SUBMIT NEW PLAT)
- ☐ WELL NAME CHANGE
- ☐ OTHER

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 _____

The drilling permit omitted the following data:

- (#15) "No. of acres in lease" - 640 acres (all of Sec. 36-11S-52W)
- (#16) "No. of acres assigned to this well" - 40 acres.

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

SIGNED

TELEPHONE NO. (817) 877-7952

NAME (PRINT) Rachelle Montgomery TITLE Regulatory Analyst

DATE 07-20-92

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

8-18-92