

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

RECEIVED

AUG 23 1972



00219585

File in duplicate for Patented and Federal lands. COLO. 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 checked="" type="checkbox"/> OTHER Wildcat		5. LEASE DESIGNATION AND SERIAL NO. Fee
2. NAME OF OPERATOR Fuel Resources Development Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 840, Denver, Colorado 80201		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Please see application to drill At proposed prod. zone		8. FARM OR LEASE NAME Thayer
14. PERMIT NO. 71-966		9. WELL NO. #1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4955 GR 4965 KB		10. FIELD AND POOL, OR WILDCAT Wildcat
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T6N, R67W, 6th P.M.
		12. COUNTY Weld
		13. STATE Colo.

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 checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	

(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 8-22-72

Run 25 sks. plug from 7775-7488, calculated fillup.
Fill hole with mud. Set 10 sks plug at base of 8-5/8" surface (240'). Set 10 sks. plug at top of 8-5/8" surface, cut 8-5/8" below plow depth. Clean up location.

DVR	<input type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>

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

SIGNED E. J. Schuh

TITLE Supervisor of Exploration & Operations

DATE 8-22-72

(This space for Federal or State office use)

DIRECTOR

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

TITLE O & G CONS. COMM.

DATE AUG 25 1972