

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

File in duplicate for
File in triplicate for



RECEIVED

AUG 5 1980

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Sage Drilling Co., Inc.	8. FARM OR LEASE NAME Fee
3. ADDRESS OF OPERATOR 6635 S. Dayton, Suite 110, Englewood, CO	9. WELL NO. 1-8
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660 FSL, 660 FEL, Sec 17-33S-43W At proposed prod. zone Same as above	10. FIELD AND POOL, OR WILDCAT Wildcat
14. PERMIT NO. 80 142	11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA Sec. 17-33S-43W 8-
15. ELEVATIONS (Show whether DF, RT, GR, etc.) KB 3964'	12. COUNTY Baca
	13. STATE CO

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 checked="" type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>waiting on connection</u>	

(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 3-29-80

Perf 3050-60 with 2 SPF
Acidized with 20 bbl. 2% KCL water followed by 500 gal. MSA



18. I hereby certify that the foregoing is true and correct
SIGNED Duke J. Jones TITLE District Geologist DATE 7/20/80

(This space for Federal or State office use)
APPROVED BY D.V. Rogers TITLE DIRECTOR O&G CONSERVATION DATE AUG 6 1980
CONDITIONS OF APPROVAL, IF ANY: None

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