

File in duplicate for Patented and Federal lands.
File in triplicate for State lands.



00216909

E DESIGNATION & SERIAL NO.

DIAN, 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME 360-1	
2. NAME OF OPERATOR Churchill Energy, Inc.		8. FARM OR LEASE NAME Eaton Law	
3. ADDRESS OF OPERATOR 777 S. Wadsworth Blvd. Bldg 2, #105 Lakewood, CO 80226		9. WELL NO. #2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface At proposed production zone NW NW Section 35 same		10. FIELD AND POOL, OR WILDCAT New Windsor	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.)	
12. COUNTY Weld		13. STATE CO	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>
REPAIR WELL. <input type="checkbox"/>	CHANGE PLANS. <input type="checkbox"/>
(Other)	Notice of Sale <input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other)	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

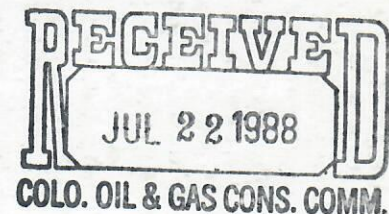
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

18. Date of work _____

* Must be accompanied by a cement verification report.

Effective July 1, 1988 the above captioned well was sold to:

H&R Well Services (36980)
0902 Road 4
Wiggins, CO 80654



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

SIGNED [Signature] TITLE Consultant DATE 7-21-88

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE AUG 02 1988
CONDITIONS OF APPROVAL, IF ANY: O & G Cons. Comm.

FOR OFFICE
FILE
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RS