

OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCESFile in duplicate for Patented and Federal lands.
File in triplicate for State lands.

00226790

LEASE DESIGNATION & 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 WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Churchill Energy, Inc. 777 South Wadsworth		7. UNIT AGREEMENT NAME New Windsor	
3. ADDRESS OF OPERATOR Irongate 2, Suite 205 Lakewood, CO 80226		8. FARM OR LEASE NAME Brunner 57440	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NWSW Sec. 26 At proposed prod. zone Same		9. WELL NO. #1	
10. FIELD AND POOL, OR WILDCAT New Windsor Sussex		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 26 7N-67W	
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 ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL. ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON ☐CHANGE PLANS. ☐

Status Report

XX

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

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

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

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.

Well is shut-in. Operator proposes to test well with current production string and pump for productivity.



FOR OFFICE USE ONLY
<i>B</i>
<i>W</i>
FILE
SE

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

SIGNED

TITLE Production Consultant

DATE 10-5-87

(This space for Federal or State office use)

APPROVED BY

William R. Smith

TITLE

DIRECTOR

DATE

DEC 18 1987

CONDITIONS OF APPROVAL, IF ANY:

O & G Cons. Comm.

STATUS REPORT REQUIRED
EVERY 6 MONTHS ON SHUT-IN
& TEMPORARILY ABANDONED WELLS.