

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

00217038

CASE DESIGNATION &amp; 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		7. UNIT AGREEMENT NAME	
Churchill Energy, Inc.		New Windsor Unit	
3. ADDRESS OF OPERATOR		8. FARM OR LEASE NAME	
777 South Wadsworth		Canal 57440	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)		9. WELL NO.	
At surface		#1	
At proposed prod. zone		10. FIELD AND POOL, OR WILDCAT	
SENE Sec. 34		New Windsor	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		34-7N-67W	
		12. COUNTY	
		Weld	
		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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL.	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other)	Status Report	(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.

Well is shut in due to downhole tubing failure.

RECEIVED  
OCT - 6 1987  
COLO. OIL & GAS CONS. COMM.

FOR OFFICE USE ONLY
FE
FE
UC
SE

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

SIGNED

TITLE Production Consultant

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DIRECTOR

DATE

DEC 18 1987

CONDITIONS OF APPROVAL, IF ANY:

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