

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

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

RECEIVED  
AUG 26 1985  
OGCC COLORADO OIL & GAS CONSERVATION COMMISSION  
SERIAL NO. 00806555

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		5. LEASE DESIG. NO. 36670	6. IF INDIAN, ---	7. UNIT AGREEMENT NAME ---	8. FARM OR LEASE NAME W. W. McWilliams	9. WELL NO. 1-29	10. FIELD AND POOL, OR WILDCAT N. Craig	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 29-8N-90W	12. COUNTY Moffat	13. STATE CO
2. NAME OF OPERATOR Kaiser-Francis Oil Company		3. ADDRESS OF OPERATOR P. O. Box 21468 Tulsa, OK 74121-1468		4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface SE SE NE (1992 FNL & 653 FEL of Sec. 29) At proposed prod. zone Same		14. PERMIT NO. ---		15. ELEVATIONS (Show whether DF, RT, GR, etc.) KB 6481 GR 6471		

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) <input type="checkbox"/>	<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) <u>Change of Operator</u> <input checked="" type="checkbox"/>	

(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 ---

Effective 7-1-85 Kaiser-Francis Oil Co. took operations. Former operator was Sun Exploration & Production Company.

WRS
FJP
HELM
JAM
RCC
LAR
CGM
ED

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

SIGNED C. Van Valkenburg TITLE Production Administrator DATE 8-19-85

(This space for Federal or State office use)

APPROVED BY William R. Smith TITLE DIRECTOR O & G Cons. Comm. DATE AUG 29 1985

CONDITIONS OF APPROVAL, IF ANY:

