



**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0136
Expires August 31, 1985

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
 DRILL DEEPEN PLUG BACK

b. TYPE OF WELL
 OIL WELL GAS WELL OTHER
 SINGLE ZONE MULTIPLE ZONE

2. NAME OF OPERATOR
CONOCO INC.

3. ADDRESS OF OPERATOR
851 WERNER COURT, CASPER, WYOMING 82601

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
 At surface 167' FSL, 67' FWL, (SW/SW)
 At proposed prod. zone Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
Approximately 7 miles east of Walden, CO

10. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any) 67'

16. NO. OF ACRES IN LEASE 307.84

17. NO. OF ACRES ASSIGNED TO THIS WELL N/A

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 711'

19. PROPOSED DEPTH 660'

20. ROTARY OR CABLE TOOLS Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
8,228' GR

22. APPROX. DATE WORK WILL START*
06/25/90

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4"	8-5/8"	24.0	150'	Est. 60 cu.ft.
7-7/8"	5-1/2"	15.5	T.D.	Est. 114 cu.ft.

BLM surface

RECEIVED
JUN 15 1990

SEE ATTACHED 10-POINT AND 13-POINT PLANS

*OIL & GAS CONS. COMM

Bond coverage pursuant to 43 CFR 3104 for lease activities associated with this well is being provided by Conoco Inc. - Blanket Nationwide Bond, NO. 8015-16-69.

BLM-Craig(3); COGCC(2); AFE 4773; RRG; MJM

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

SIGNED Robert R. [Signature] TITLE Administrative Supervisor DATE 06/11/90

(This space for Federal or State office use)
 PERMIT NO. 90-629 APPROVAL DATE JUN 19 1990 EXP. DATE OCT 17 1990

APPROVED BY Dennis R. Bicknell TITLE Director DATE JUN 19 1990

CONDITIONS OF APPROVAL, IF ANY: by [Signature]



21. NUMBER
05 057 6356

*See Instructions On Reverse Side