

**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  
MAY 30 1974

COLO. OIL & GAS CONNS. COMM. 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR <b>TREND EXPLORATION LIMITED</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR <b>600 Capitol Life Center, Denver, Colorado 80203</b>		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <b>300' FEL, 450' FSL, Sec. 6</b>  <b>At proposed prod. zone @ 7300', 580' FEL, 860' FNL, Sec. 7</b>		8. FARM OR LEASE NAME <b>Craig Airport</b>	
14. PERMIT NO. <b>7355</b>		9. WELL NO. <b>1</b>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>KB 6199'</b>		10. FIELD AND POOL, OR WILDCAT <b>Buck Peak Field</b>	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 6, T-6-N, R-90-W</b>	
		12. COUNTY <b>Moffat</b>	18. STATE <b>Colorado</b>



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"/>	<b>Redrill</b> <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) <input 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 May 30, 1974

Past Work:

1. Drilled to 8950', set 13-3/8" csg to 354', 8-5/8" to 4283', 5" from 4235' to 8941'.
2. Perf. 8033 to 8122. Tests inconclusive. Attempt to cmt liner thru perfs. at 8709'. Circ. shale into casing-tubing annulus and stuck tbg. Left fish from 6986 to 8682'.

Planned Work:

1. Set cmt. plug at 4235', top of 5" liner. Cut window in 8-5/8" casing and drill deviated hole to 8200'.
2. Deviation surveys will be run. Well will be over 660' from the "Pooled" boundaries at all times.
3. A 5-1/2" long string will be run and the well completed, if commercial.

DVR	<input checked="" type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input type="checkbox"/>

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

SIGNED M. B. McMurry TITLE M. B. McMurry, Engineer DATE 5/29/74

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE JUN 4 1974

CONDITIONS OF APPROVAL, IF ANY:

X