



RECEIVED
OIL & GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADO **OCT 5 - 1967**

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

COLO. OIL & GAS CONS. COMM.

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. OG-63/264
2. NAME OF OPERATOR Sun Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME -
3. ADDRESS OF OPERATOR P.O. Box 1798, Denver, Colorado 80201		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 990' FNL & 990' FWL Sec. 34 At proposed prod. zone same		8. FARM OR LEASE NAME State
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6240 Gr.		10. FIELD AND POOL, OR WILDCAT North Craig
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34-8N-90W
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.) Plan to shoot off 4½" csg at 1480' and set the following cmt plugs: 20 sack plug @ 2550/2810' 20 " " 1410/1482' 20 " " 260/325' 10 " " surface.		12. COUNTY OR PARISH Moffat
		13. STATE Colorado

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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

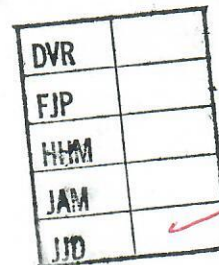
WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
(Other) <input type="checkbox"/>	

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

Plan to shoot off 4½" csg at 1480' and set the following cmt plugs:

20 sack plug @ 2550/2810'
20 " " 1410/1482'
20 " " 260/325'
10 " " surface.

(verbal permission obtained from the Oil & Gas Commission)



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

SIGNED L.L. Jester

TITLE Office Supervisor, Oper.
Dept.

DATE 10-4-67

(This space for Federal or State office use)

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE Director

DATE OCT 16 1967