

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



00213269

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

RECEIVED

JAN 9 1975

5. LEASE DESIGNATION AND SERIAL NO.
COLO. OIL & GAS CON. 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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <u>Dry Hole</u>		5. LEASE DESIGNATION AND SERIAL NO. COLO. OIL & GAS CON. COMM.	
2. NAME OF OPERATOR <u>Trend Exploration Limited</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR <u>600 Capitol Life Center, Denver, Colorado 80203</u>		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 <u>943' FNL, 1953' FWL Sec. 23</u> At proposed prod. zone <u>@ 8259'-692'N, 271' W of Surface</u>		8. FARM OR LEASE NAME <u>Deakins</u>	
14. PERMIT NO. <u>73-618</u>		9. WELL NO. <u>1 Sidetrack</u>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>GL 6742</u>		10. FIELD AND POOL, OR WILDCAT <u>Buck Peak</u>	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 23, T6N-R90W</u>	
		12. COUNTY <u>Moffat</u>	
		13. STATE <u>Colorado</u>	

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"/>	

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 checked="" 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 10-8-74

Lay down 2-7/8" tubing, cut 7-5/8" casing @ 2163' and layed down.
 Spotted 50 sack plug across 7-5/8" tubing at 2200'-2080'
 Spotted 50 sack plug across 10-3/4" surface pipe @ 351'-250'
 Set 10 sack cement plug at surface
 Installed dry hole marker below plow depth
 Filled pits and cleaned up location

Note: Hole filled with drilling mud below and between plugs

**EXHAUSTED
OIL WELL**

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

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

SIGNED

Jack E. UsherTITLE Operations EngineerDATE 12-26-74

(This space for Federal or State office use)

APPROVED BY

Mr. Rogers

TITLE

DIRECTOR

OIL & GAS CON. COMM.

DATE

JAN 17 1975

CONDITIONS OF APPROVAL, IF ANY.