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OGCC FORM 4

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

REV. 7-64

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

COLORADO OIL & GAS CONSERVATION COMMISSION  
5. LEASE DESIGNATION AND SERIAL 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  GAS WELL  OTHER Dry

2. NAME OF OPERATOR TREND EXPLORATION LIMITED

3. ADDRESS OF OPERATOR 600 Capitol Life Center, Denver, Colorado 80203

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface 1850' NSL, 700' WEL, Sec. 6, T-6-N, R-89-W  
At proposed prod. zone 3070' NSL, 418' EWL, Sec. 5, T-6-N, R-89-W

5. LEASE DESIGNATION AND SERIAL NO. 00224445

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO. 1-6

10. FIELD AND POOL, OR WILDCAT Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NE 1/4 SE 1/4 Sec. 6, T-6-N, R-89-W

12. COUNTY Routt 13. STATE Colorado

14. PERMIT NO. 72-748 15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 6332'

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <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 December 6, 1973

Received verbal approval December 5, 1973.

1. Cut off 4-1/2" casing at free point, set 50 sx plug.
2. Set plug at 4100-4200' (Trout Cr. - Mesa Verde).
3. Set plug at bottom of 10-3/4"
4. Set plug with dry hole marker at surface.
5. Restore surface location. Will be done as soon as weather permits.

DVR	
FJP	✓
HHM	✓
JAM	✓
JJD	✓

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

SIGNED [Signature] TITLE Engineer DATE 12/13/73

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE DEC 19 1973

CONDITIONS OF APPROVAL, IF ANY: