



00204633

STATE OF COLORADO
OIL & GAS CONSERVATION COMMISSION

DEPARTMENT OF NATURAL RESOURCES

RECEIVED

API - 05 123 5408

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

OCT 03 1986

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back on a well under lease or
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION & SERIAL NO. API - 05 123 5408	
2. NAME OF OPERATOR Cache Exploration, Inc. (12835)		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 2480, Greeley, CO 80632		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 660' FNL & 1980' FWL At proposed prod. zone		8. FARM OR LEASE NAME CEI-LRB NO.1	
14. PERMIT NO. 86-538		12. COUNTY Weld	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) Ground - 4756'		13. STATE CO	
10. FIELD AND POOL, OR WILDCAT Wildcat		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA T7N, R58W, Sec. 12: NE 1/4 NE 1/4	

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 checked="" 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 type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.)

18. Date of work ASAP

* Must be accompanied by a cement verification report.

TOP OF CEMENT - 5580'

PERFS - 6236' - 6241' (3 shots per foot)



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

SIGNED

TITLE

President

DATE 10-1-86

(This space for Federal or State office use)

SUPR. PETROLEUM ENGINEER

APPROVED BY

TITLE

Oil & Gas Cons. Comm.

DATE

OCT 06 1986

CONDITIONS OF APPROVAL, IF ANY: