



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

SUBMIT ORIGINAL AND 1 COPY

FOR OFFICE USE ONLY			
ET	FE	UC	SE

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.)

5. FEDERAL/INDIAN OR STATE LEASE NO.

Not Applicable

1.

☐ OIL WELL ☐ GAS WELL ☒ COALBED METHANE ☐ INJECTION WELL ☐ OTHER

6. PERMIT NO.

90-424

2. NAME OF OPERATOR

Cockrell Oil Corporation

7. API NO.

05 081 6720

3. ADDRESS OF OPERATOR

1600 Smith Road, Suite 4600

8. WELL NAME

Fee

CITY STATE ZIP CODE

Houston Texas 77002-7348

9. WELL NUMBER

791 3409

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)

At surface

1972' FSL, 663' FEL

At proposed prod. zone

Same

12. COUNTY

Moffat

10. FIELD OR WILDCAT

Wildcat

11. QTR. QTR. SEC., T.R. AND MERIDIAN

NE $\frac{1}{4}$ SE $\frac{1}{4}$ Sec. 34, T7N, R91W

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

13A. NOTICE OF INTENTION TO:

- ☐ PLUG AND ABANDON
- ☐ MULTIPLE COMPLETION
- ☐ COMMINGLE ZONES
- ☐ FRACTURE TREAT
- ☐ REPAIR WELL
- ☐ OTHER

13B. SUBSEQUENT REPORT OF:

- ☐ FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)
- ☐ ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS)
- ☐ REPAIRED WELL
- ☐ OTHER

*Use Form 5 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingle Completions and Recompletions

13C. NOTIFICATION OF:

- ☐ SHUT-IN/TEMPORARILY ABANDONED (DATE _____) (REQUIRED EVERY 6 MONTHS)
- ☐ PRODUCTION RESUMED (DATE _____)
- ☐ LOCATION CHANGE (SUBMIT NEW PLAT)
- ☐ WELL NAME CHANGE

☒ OTHER Change Well Name and Number

14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (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)

15. DATE OF WORK On Approval

Change Well Name and Number To:

Well Name: 791 3409

Well Number: 1

RECEIVED

MAY 25 1990

COLO. OIL & GAS CONS. COMM.

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

SIGNED Dale Heitzman

TELEPHONE NO. (307) 266-4840

NAME (PRINT) Dale Heitzman

TITLE Consultant

DATE May 22, 1990

(This space for Federal or State office use)

APPROVED Stephen Pott

TITLE Sr. Engr.

DATE 6/6/90

CONDITIONS OF APPROVAL, IF ANY: