

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

SUBMIT ORIGINAL AND 1 COPY

FOR OFFICE USE ONLY			
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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 type="checkbox"/> COALBED METHANE <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> OTHER			3. FEDERAL/INDIAN OR STATE LEASE NO.
2. NAME OF OPERATOR Holmes M. Shefstead & Guy T. Shefstead			6. PERMIT NO. 90-538
3. ADDRESS OF OPERATOR P. O. Box 608 CITY STATE ZIP CODE Craig CO. 81625			7. API NO. 05-081-6724
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 682' FSL & 1287' FWL At proposed prod. zone SAME			8. WELL NAME 791-2613
			9. WELL NUMBER No. 1
			10. FIELD OR WILDCAT Wildcat
12. COUNTY Moffat			11. QTR. QTR. SEC., T.R. AND MERIDIAN SWSW 26, 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 reports 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 Transfer of Ownership

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 _____

Shefstead hereby assumes all liabilities for the plugging and abandonment of the well and for the restoration of the surface, in accordance with the regulations then in effect.

RECEIVED

SEP 28 1992

COLO. OIL & GAS CONS. COMM.

Water well

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

SIGNED

Holmes M. Shefstead

Guy T. Shefstead

TELEPHONE NO. 303) 824-6835

NAME (PRINT)

see above

TITLE

Owners

DATE

9/17/92

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

TITLE

Sr. Petroleum Engineer
O & G Conservation Commission

DATE

NOV 18 1992

Discuss with
Thom prior
to approval.

- 2) Don't the rules
require a statement
from surface owner ^{HCS.}
3) water permit ^{for surface} ~~for Cockrell~~
not surface owner ^{with} ~~DL~~

Transfer of ownership to
New operator is
Thomas M. Shefstead
& Guy T. Shefstead

RECEIVED

SEP 20 1985

COLO. OIL & GAS CONC. COMM.

St. Petroleum Engineer
O & G Conservation Commission

DATE: 9/17/85