



00514462

COLORADO

OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

SUBMIT ORIGINAL AND 1 COPY

FOR OFFICE USE ONLY			
FILE	FILE	LOC	ST

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.)

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

1. NAME OF OPERATOR

Union Pacific Resources Company

2. ADDRESS OF OPERATOR

P.O. Box 7 MS 3407

CITY

STATE

ZIP CODE

Fort Worth,

TX

76101-0007

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

At surface

See below

At proposed prod. zone

All drilled as straight hole.

12. COUNTY

Cheyenne

5. FEDERAL INDIAN OR STATE LEASE NO.

6. PERMIT NO.

See below

7. API NO.

See below

8. WELL NAME

See below

9. WELL NUMBER

See below

10. FIELD OR WILDCAT

See below

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

See below

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

12A. NOTICE OF INTENTION TO:

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

12B. 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 3 - Well Completion or Recompletion Report and Log for subsequent reports of Multiple, Commingled Completions and Recompletions.

12C. NOTIFICATION OF:

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

TOC & stage cement depth

4. 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.)

5. DATE OF WORK: _____

Per your request, please find below the stage cement depths and top of cement for the #2 Christopher, #4 Christopher, and the #1 Chunky.

#2 Christopher
Sec. 1-12S-51W
Cheyenne County
permit #: 93-519
API #: 05-017-7375
TOC: 5990'

Stage: not required per permit.

#4 Christopher 43-1
Sec. 1-12S-51W
Cheyenne County
permit #: 93-673
API #: 05-017-7383
TOC: 2630' calculated
Stage: 3257'

#1 Chunky 12-28
Sec. 28-13S-43W
Cheyenne County
permit #: 93-603
API #: 05-017-7380
TOC: 4692'
Stage: none

If further information is needed, please contact the undersigned at (817)877-6530.

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

SIGNED Cami Minzenmayer TELEPHONE NO. (817)877-6530

NAME (PRINT) Cami Minzenmayer TITLE Regulatory Analyst DATE 11-05-93

(This space for Federal or State office use)

APPROVED [Signature] TITLE _____ DATE 12-17-93

CONDITIONS OF APPROVAL, IF ANY

CONFIDENTIAL