



00202431

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

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

RECEIVED
SEP 8 1980

COLO. OIL

6. LEASE DESIGNATION & SERIAL NO. OIL & GAS CONS. COMM	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Peltier	
9. WELL NO. #1-11	
10. FIELD AND POOL, OR WILDCAT Bear River	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 11, T6N-R87W	
12. COUNTY Routt	13. STATE Colorado

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

2. NAME OF OPERATOR
Trigg Drilling Company, Inc.

3. ADDRESS OF OPERATOR
2122 Western Federal Savings Building, Denver, CO. 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface SE SW
At proposed prod. zone 1955' FWL, 665' FSL

14. PERMIT NO.
80-699

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6580' GR (est)

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

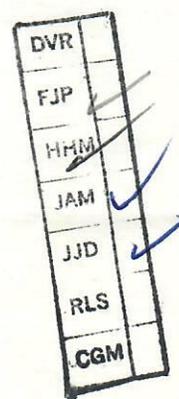
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input 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"/>	

(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 _____ * Must be accompanied by a cement verification report.

✓ WELL PLUGGED w/35 sk at 3000' 8/16/80.
Surface plug was set by hand on 8/18/80. 15 sacks were used.



19. I hereby certify that the foregoing is true and correct
SIGNED Hugh E. Harvey TITLE Division Engineer DATE 9/5/80
(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR O & G CONS. COMM. DATE SEP 11 1980
CONDITIONS OF APPROVAL, IF ANY:

AR

DX