

CO OGCC FORM 4

PetroForms



02469256

**STATE OF COLORADO**  
**OIL AND GAS CONSERVATION COMMISSION**  
 DEPARTMENT OF NATURAL RESOURCES  
 SUBMIT ORIGINAL AND 1 COPY

SE/4 SEC. 8 T3S, R63W  
 LOC # 378393

FOR OFFICE USE			
ET	FE	UC	SE

**SUNDRY NOTICES AND REPORTS ON WELLS**

(Do not use this form for proposals to drill or to deepen of 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 checked="" type="checkbox"/> OTHER			5. FEDERAL/INDIAN OR STATE LEASE NO.
2. NAME OF OPERATOR <b>H S RESOURCES, INC.</b>			6. PERMIT NO. <b>941278</b>
3. ADDRESS OF OPERATOR <b>3939 CARSON AVENUE</b>			7. API NO. <b>05 005 7014</b>
CITY <b>EVANS</b> STATE <b>CO</b> ZIP CODE <b>80620</b>			8. WELL NAME <b>HSR-Knopf</b>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 14 below.) At surface <b>1343' FNL &amp; 1270' FEL</b> At proposed production zone <b>SAME</b>			9. WELL NUMBER <b>8-21</b>
12. COUNTY <b>Arapahoe</b>			10. FIELD OR WILDCAT <b>Bombing Range</b>
			11. QTR. QTR. SEC. T.R. AND MERIDIAN <b>SE NE Sec. 21-T4S-R63W</b> <b>6th P.M.</b>

## 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:  
**Rule 911 WBBDF**

14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (Clearly state all pertinent details, and give pertinent data, 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

**5,000 barrels from the above well will be hauled to the "Harry Mitchell Farm" Master Land Treatment Site SE/4 of Section 8-T3S-R63W. The bentonitic drilling fluids will be land treated according to Rule 911.**

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

SIGNED

*Edwin Swan*PHONE NO. **330-0614**NAME (PRINT) **Edwin Swan**TITLE **Field Superintendent**DATE **09/15/94**

(This space for Federal or State office use)

APPROVED

*Reviewed by DCB*

TITLE

*EPS*

DATE

*8/17/95*

CONDITIONS OF APPROVAL, IF ANY: