

PetroForms

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



02469181

FOR OFFICE USE			
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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.)

5. FEDERAL/INDIAN OR STATE LEASE NO.

1. OIL WELL GAS WELL COALBED METHANE INJECTION WELL OTHER

6. PERMIT NO.
94-932

2. NAME OF OPERATOR
H S RESOURCES, INC.

7. API NO.
05 123 18417

3. ADDRESS OF OPERATOR
3939 CARSON AVENUE

8. WELL NAME
HSR-LDS "B"

CITY STATE ZIP CODE
EVANS CO 80620

9. WELL NUMBER
5-17

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 14 below.)

10. FIELD OR WILDCAT
Wattenberg

At surface
1830' FNL & 660' FWL

12. COUNTY
WELD

11. QTR. QTR. SEC., T.R. AND MERIDIAN
**SW NW Sec. 17-T3N-R64W
6th P.M.**

At proposed production zone

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/Commingled Completions and Recompletions

13C. NOTIFICATION OF:

- SHUT-IN/TEMPORARILY ABANDONES
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 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

5,000 barrels from the above well will be left on the "LDS Farm" On-Site Land Treatment, the SWNW of section 17-T3N-R64W. 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 **09/26/94**

(This space for Federal or State office use)

APPROVED _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____