

PetroForms

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



02469183

FOR OFFICE USE			
ET	FE	UC	SB

**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.  
**941145**

2. NAME OF OPERATOR  
**HS RESOURCES, INC.**

7. API NO.  
**05 123 18507**

3. ADDRESS OF OPERATOR  
**3939 CARSON AVENUE**

8. WELL NAME  
**HSR-LDS "B"**

CITY STATE ZIP CODE  
**EVANS CO 80620**

9. WELL NUMBER  
**3-17**

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  
**660' FNL & 1780' FWL**

12. COUNTY  
**WELD**

11. QTR. QTR. SEC., T.R. AND MERIDIAN  
**NE 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/Commingle 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 NENW 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

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: