



00786352

OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

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

RECEIVED

MAY 5 - 1967

COLO. OIL & GAS CONS. COMM.

DRY 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 [X] GAS WELL [] OTHER []
2. NAME OF OPERATOR Guest & Moller Oil Company
3. ADDRESS OF OPERATOR 4726 Jacksboro Hwy, Wichita Falls, Texas 76302
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NE SE SW 990 of s1 330 of e1
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, CR, etc.) 4157' GR - 4169' KB
12. COUNTY OR PARISH Logan 13. STATE Colorado

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF [] PULL OR ALTER CASING []
FRACTURE TREAT [] MULTIPLE COMPLETE []
SHOOT OR ACIDIZE [] ABANDON []
REPAIR WELL [] CHANGE PLANS []
(Other) []

WATER SHUT-OFF [] REPAIRING WELL []
FRACTURE TREATMENT [] ALTERING CASING []
SHOOTING OR ACIDIZING [] ABANDONMENT [X]
(Other) []

(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.)

Well plugged as specified on our approved abandonment procedure. Recovered 3545' 5 1/2" on 6-13-66. Surface marker placed in surface pipe.

Table with 2 columns and 5 rows: DVR, FJP, HHM, JAM, JD. FJP and JD have checkmarks.

EX Oil Prod.

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

SIGNED [Signature]

TITLE Partner

DATE 5-3-67

(This space for Federal or State office use)

APPROVED BY [Signature] CONDITIONS OF APPROVAL, IF ANY:

TITLE Director

DATE JUN 7 1967