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OIL AND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADOFile in duplicate for Patented and Federal lands.
File in triplicate for State lands.

MAR 23 1966

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.)OIL & GAS
CONSERVATION COMMISSION

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR Guest & Moller Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---
3. ADDRESS OF OPERATOR Unit H 4726 Jacksboro Hwy, Wichita Falls, Texas 76302		7. UNIT AGREEMENT NAME Luft
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NE SE SW At proposed prod. zone Muddy		8. FARM OR LEASE NAME C. Luft, Jr.
14. PERMIT NO.		9. WELL NO. 13
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4157 GR 4169 KB		10. FIELD AND POOL, OR WILDCAT Luft
		11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA Sec 17 T8N R-53W
		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:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT	<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.)

To pull pipe, plug and abandon well

DVE	
WRS	
HHM	
JAM	
FJP	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
FILE	

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

SIGNED

TITLE Partner

DATE 3-18-66

(This space for Federal or State office use)

APPROVED BY

TITLE Director

DATE

APR 5 1966

CONDITIONS OF APPROVAL, IF ANY: