

OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

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

MAY 5 - 1967

COLO. OIL & GAS CONG. COMM.

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.)

1. OIL WELL [] GAS WELL [] OTHER Water injection
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 999 S/L & 994 W/L NE/4 At proposed prod. zone Muddy
14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4181.6 GR

5. LEASE DESIGNATION AND SERIAL NO.
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME Luft
8. FARM OR LEASE NAME G. Morris
9. WELL NO. 7 WI
10. FIELD AND POOL, OR WILDCAT Luft
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 20, T6N - R53W
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 [] FRACTURE TREAT [] SHOOT OR ACIDIZE [] REPAIR WELL [] (Other)
PULL OR ALTER CASING [] MULTIPLE COMPLETE [] ABANDON [] CHANGE PLANS []
SUBSEQUENT REPORT OF: WATER SHUT-OFF [] FRACTURE TREATMENT [] SHOOTING OR ACIDIZING [] (Other)
REPAIRING WELL [] ALTERING CASING [] ABANDONMENT [X]
(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 3710' 5 1/2" on 1-17-67. Surface marker placed in surface pipe.



Ex 2,1 Prod

Table with 2 columns: Name, Status. Rows: DVR, FJP, HHM, JAM, JJD. Checkmarks in FJP, JAM, JJD.

18. I hereby certify that the foregoing is true and correct
SIGNED: Herbert Moller TITLE: Partner DATE: 5-3-67

(This space for Federal or State office use)
APPROVED BY: M. Rogers TITLE: Director DATE: JUN 7 1967
CONDITIONS OF APPROVAL, IF ANY:

