



**State of Colorado**  
**Oil and Gas Conservation Commission**  
DEPARTMENT OF NATURAL RESOURCES

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*GR*

RECEIVED  
DEC 20 99  
COGCC

**SUNDRY NOTICE**

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (back of this form).

ET  OE  PR  ES

1. OGCC Operator Number: <u>41385</u>		4. Contact Name & Phone		Complete the Attachment Checklist	
2. Name of Operator: <u>HS Resources, Inc.</u>		<u>Elaine Rivas</u>			
3. Address: <u>3939 Carson Avenue</u>		No: <u>970-330-0614</u>			
City: <u>Evans</u>	State: <u>CO</u>	Zip: <u>80620</u>	Fax: <u>970-330-0431</u>	Survey Plat	OGCC
5. API Number: <u>05-123-16757</u>		6. OGCC Lease No: <u>61409</u>		Directional Survey	
7. Well Name: <u>HSR-LARIMER</u>		Number: <u>13-24</u>		Surface Equipment	
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>SWSW Sec 24-T5N-R65W 6th P.M.</u>				Technical Information Page	<input checked="" type="checkbox"/>
9. County: <u>Weld</u>		10. Field Name: <u>Wattenberg</u>		Other	
11. Federal, Indian or State Lease Number:					

**12. General Notice**

Change well name from \_\_\_\_\_ to \_\_\_\_\_ Effective Date: \_\_\_\_\_

Change of location from \_\_\_\_\_ to \_\_\_\_\_

Attach new survey pla \_\_\_\_\_

Abandoned Location. Is site ready for inspection?  Yes  No Effective Date: \_\_\_\_\_  
Was location ever built?  Yes  No Permit No: \_\_\_\_\_

Well first shut in or temporarily abandoned \_\_\_\_\_ Notice of continued shut-in status.  
Has production equipment been removed from Site?  Yes  No  
MIT required if shut in longer than two years. Date of last MIT: \_\_\_\_\_

Well resumed production on \_\_\_\_\_

Request for Confidential Status (6 months). 

Final reclamation will commence approximately on \_\_\_\_\_

Final reclamation is completed and site is ready for inspection. *Attach technical page describing final reclamation procedures per Rule 1000c.4.*

Change of Operator (prior to drilling). Effective Date: \_\_\_\_\_ Plugging bond:  Blanket  Individual

Spud Date \_\_\_\_\_

**13. Technical Engineering/Environmental Notice**

Notice of Intent Approximate Start Date: \_\_\_\_\_

Report of Work Done Date work Completed: 12/6/99

*Details of work must be described in full on Technical Information Page (Page 2 must be submitted).*

<input type="checkbox"/> Commingle Zones	<input type="checkbox"/> Request to Vent or Flare	<input type="checkbox"/> E & P Waste Disposal
<input type="checkbox"/> Intent to Recomplete	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Convert Well to Injection (in an Approved Secondary Project)	<input type="checkbox"/> New Pit
<input checked="" type="checkbox"/> Reservoir Stimulation	<input type="checkbox"/> Additional Source Leases for Water Disposal Well	<input type="checkbox"/> Landfarming
<input type="checkbox"/> Perforating/Perfs Added	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases
Gross Interval Changed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Elaine Rivas  
Signed: Elaine Rivas Title: Operations Tech Date: 12/15/99

OGCC Approved: [Signature] Title: PE Date: 4/21/00  
CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE

FOR OGCC USE ONLY			
RECEIVED			
DEC 20 99			
OGCC			
ET	OE	PR	ES

1. OGCC Operator Number:	41385	2. API Number:	05-123-16757
3. Name of Operator:	HS Resources, Inc.		
4. Well Name:	HSR-LARIMER	Number:	13-24
5. Location (QtrQtr, Sec, Twp, Rng, Meridian):	SWSW Sec 24-T5N-R65W 6th P.M.		

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within thirty (30 days of work) completed as a "subsequent" report and must accompany Form 4, Page 1.

6. DESCRIBE PROPOSED OR COMPLETED OPERATIONS

Codell      Refrac

12/1/99    reperfurate the Codell formation from 6942' to 6952'

12/6/99    Refractured the Codell formation with:

- 0 # 100 mesh
- 261200 # 20/40 mesh
- 88032 gal. gelled fluid

Returned well to NB-CD production.