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COLORADO OIL & GAS CONSERVATION COMMISSION

OGCC FORM 4

OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES
OF THE STATE OF COLORADO

REV. 7-64

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

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

2. NAME OF OPERATOR Raymond Oil Company, Inc. (purchased from D & L Oil Co., effective 2-1-73)

3. ADDRESS OF OPERATOR 200 West Douglas, Wichita, Kansas 67202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface NW NW SW
At proposed prod. zone

5. LEASE DESIGNATION AND SERIAL NO. _____

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME _____

8. FARM OR LEASE NAME Knutson

9. WELL NO. 1

10. FIELD AND POOL, OR WILDCAT Yenter

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 2-8N-54W

12. COUNTY Logan 13. STATE Colorado

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4296' KB

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.)

Date of work As soon as possible

- Gravel above perfs
- 5 Sx cement above gravel
- 15 Sx cement at bottom of surface
- 10 Sx cement at top of surface

DVR	<input checked="" type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HHM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>

~~Enoil Prod.~~

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

RAYMOND OIL COMPANY, INC.

SIGNED Patrick R. Raymond TITLE Vice-President DATE 2-23-73

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE MAR 6 1973

CONDITIONS OF APPROVAL, IF ANY: _____