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OCT 29 1979



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ND GAS CONSERVATION COMMISSION DEPARTMENT OF NATURAL RESOURCES OF THE STATE OF COLORADO

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

0010-011-0-012-0012 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 <input checked="" type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. No	
2. NAME OF OPERATOR B. J. Hickman Oil Operating		6. IF INDIAN, ALLOTTEE OR TRIBE NAME No	
3. ADDRESS OF OPERATOR Box 130 Kimball, Nebraska 69145		7. UNIT AGREEMENT NAME No	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Lot 2, N $\frac{1}{2}$ SW, SESW $\frac{1}{4}$, Sec 23, 12N - 55W At proposed prod. zone		8. FARM OR LEASE NAME No	
14. PERMIT NO. 69-24		9. WELL NO. No 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		10. FIELD AND POOL, OR WILDCAT Sheep Creek Buczowsky	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 23 - 12N - 55W	
		12. COUNTY Weld	
		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 COMPIETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input checked="" type="checkbox"/> Change of Operator	

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 _____

Change of Operator from Exeter Exploration Company, Denver, Colo.
to B. J. Hickman Oil Operating

\$5,000.00 State Surety Co. bond to follow

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

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

SIGNED B. J. Hickman

TITLE Owner-Operator

DATE 10-24, 1979

(This space for Federal or State office use)

APPROVED BY M. Rogers
CONDITIONS OF APPROVAL, IF ANY.

TITLE DIRECTOR
O & G CONS. COMM.

DATE NOV 7 1979