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JUL 11 1985



00283984

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

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR J.D. (Don) Gregory		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 26 Kimball, Ne 69145		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 610' FWL 1900' FSL, Section 23, 12N-56W At proposed prod. zone		8. FARM OR LEASE NAME BUCZKOWSKYJ	
14. PERMIT NO. 69-021		9. WELL NO. #1-X	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4919 GL		10. FIELD AND POOL, OR WILDCAT SLEEPER	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23, 12N-56W	
		12. COUNTY WELD	13. STATE CO.

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) CHANGE OF OPERATOR <input checked="" type="checkbox"/>	XXXX <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 _____

EFFECTIVE MAY 1, 1985, HICKMAN & GREGORY OIL OPERATING INCORPORATED SOLD 100%

INTEREST TO: ?

J.D. (Don) Gregory

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

SIGNED Don Gregory TITLE Operator

DATE 5/1/85

(This space for Federal or State office use)

APPROVED BY William Smith TITLE DIRECTOR

DATE JUN 21 1985

CONDITIONS OF APPROVAL, IF ANY:

O & G Cons. Comm.

Subject to receipt of bond.

