



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

FOR OGCC USE ONLY
RECEIVED
JUL 31 1998
COLO. OIL & GAS CONS. COMM.

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).

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1. OGCC Operator Number: <u>41385</u>	4. Contact Name & Phone
2. Name of Operator: <u>HS Resources, Inc.</u>	<u>Fred J. Clausen</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>

Complete the Attachment Checklist

	Oper	OGCC
5. API Number: <u>05-123-19638</u>		
6. OGCC Lease No:		
7. Well Name: <u>HSR-Northglenn State</u> Number: <u>14-36</u>		
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>SWSW Sec 36-T1N-68W 6th P.M.</u>		
9. County: <u>Weld</u> 10. Field Name: <u>Wattenberg</u>		
11. Federal, Indian or State Lease Number:		

12. General Notice

Change well name from HSR-Northglenn State 14-36 to HSR-Northglenn State 13-36 Effective Date: 7/30/98

Change of location from Attach new survey plat. to _____

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

<input type="checkbox"/> Notice of Intent Approximate Start Date: _____	<input type="checkbox"/> Report of Work Done Date work Completed: _____
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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"/> Intent to Recomplete <input type="checkbox"/> Change Drilling Plans <input type="checkbox"/> Reservoir Stimulation <input type="checkbox"/> Perforating/Perfs Added Gross Interval Changed? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Request to Vent or Flare <input type="checkbox"/> Repair Well <input type="checkbox"/> Convert Well to Injection (in an Approved Secondary Project) <input type="checkbox"/> Additional Source Leases for Water Disposal Well <input type="checkbox"/> Other: _____	<input type="checkbox"/> E & P Waste Disposal <input type="checkbox"/> Beneficial Reuse of E&P Waste <input type="checkbox"/> New Pit <input type="checkbox"/> Landfarming <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases
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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: 7/30/98
 OGCC Approved: _____ Title: _____ Date: 8/5/98

CONDITIONS OF APPROVAL, IF ANY: