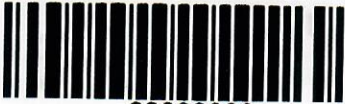


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GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES
THE STATE OF COLORADO

MAR 18 1983

Duplicate for Patented and Federal lands.
File in triplicate for State lands.5. LEASE DESIGNATION AND SERIAL NO.
COLO. OIL & GAS CONS. COMM.
Fee

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Kiowa State

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

Nee Noshe

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 20, T19S-R47W

12. COUNTY

Kiowa

13. STATE

Colorado

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 ☐ P&A

2. NAME OF OPERATOR

TXO Production Corp.

3. ADDRESS OF OPERATOR

1800 Lincoln Center Bldg., Denver, CO 80264

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)

At surface NE/4 NE/4 Sec. 20, T19S-R47W

At proposed prod. zone
Same

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GL 4011

KB 4021

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT

☒
☒
☒
☐
☐(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 perti-
nent to this work.)

Date of work 3-11-83

- 1) 25 sxs @ 340'
- 2) 10 sxs @ 40'
- 3) 5 sxs in MH
- 4) 5 sxs in RH
- 5) Cut surface csg 2' from surface
- 6) Weld cap on

DVR	
FJP	
HFM	
JAM	
RCC	
LAR	
GCM	



00653511

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

SIGNED

Frank D. Tsuru

TITLE Drlg. & Prod. Engr.

DATE 3/16/83

(This space for Federal or State office use)

DIRECTOR

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE O & G Cons. Comm.

DATE MAR 23 1983