

OIL AND  
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File in

99999999

ION

RECEIVED

JUL 16 1969

5. LEASE DESIGNATION AND SERIAL NO.

COLO. OIL &amp; GAS CONS. COMM.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## 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

Old dry hole previously plugged &amp; abandoned.

2. NAME OF OPERATOR

Carl A. Houy

3. ADDRESS OF OPERATOR

602 Patterson Building, Denver, Colorado 80202

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

At surface

660' NSL and 1980' EWL SW/4 Section 17,

At proposed prod. zone T3S, R56W

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Blomenkamp

9. WELL NO.

A-2

10. FIELD AND POOL, OR WILDCAT

Big Beaver

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

Sec. 17, T3S, R56W

14. PERMIT NO.

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

4729 KB, 4722 GR

12. COUNTY OR PARISH

Washington

13. STATE

Colorado

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

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT

(Other) ☒ Re-plugging old hole

XX

(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.)

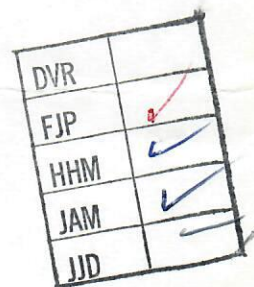
Surface pipe was found to be leaking and therefore the hole was replugged in the following manner:

Dug out and cut off surface pipe. Rewelded cap on 8-5/8" casing.

121-05568



00837643



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

SIGNED

R. L. Comer

TITLE Field Superintendent

DATE 7-14-69

(This space for Federal or State office use)

DIRECTOR

APPROVED BY

TITLE

DATE

JUL 17 1969

CONDITIONS OF APPROVAL, IF ANY: