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COLO. OIL &amp; GAS CON. COMM.

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STATE OF COLORADO  
GAS CONSERVATION COMMISSION  
DEPARTMENT OF NATURAL RESOURCES

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR Barrett Energy Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 221 E. 29th Suite 240 Loveland, Colorado 80537		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 600 FNL 1700 FWL Sec. 13-33-43W At proposed prod. zone same		8. FARM OR LEASE NAME Hancock	
14. PERMIT NO. 84806		9. WELL NO. 4-13	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4027' G.L.		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 13-T33-R44W	
		12. COUNTY Baca	13. STATE Col

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

### NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL, ☐

(Other)

FULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON ☐CHANGE PLANS: ☐

### SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐Status update ☒

(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.)

18. Date of work \_\_\_\_\_

\* Must be accompanied by a cement verification report.

The well is SI Waiting On Pipeline Hookup

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

SIGNED Mike Evers

TITLE Operations Manager

DATE 2-6-86

(This space for Federal or State office use)

APPROVED BY William Smith

TITLE DIRECTOR  
O & G Cons. Comm.

DATE FEB 10 1986

CONDITIONS OF APPROVAL, IF ANY: