

RECEIVED

OGC FORM 4

REV. 7-64

OIL AND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADO

MAY 15 1967



00264266

File in duplicate for Patented and Federal lands.
File in triplicate for State lands.

COLO. OIL & GAS COM. 5, LEASE DESIGNATION AND SERIAL NO.

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 type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Kimbark Exploration Ltd.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 201 University Blvd. Denver, Colo.		8. FARM OR LEASE NAME Harley	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 625' FSL & 640' FEL of SE NW At proposed prod. zone same		9. WELL NO. 1	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT North Minto <i>Cayuse</i>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4108 KB		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30-9N-52W	
		12. COUNTY OR PARISH Logan	13. STATE Colo.

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) <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 checked="" type="checkbox"/> XX
(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.)

- Set plugs at 4940 with 50 sacks of cement
120' w/15 sacks of cement at bottom of surface pipe
30' w/10 sacks of cement in top of surface pipe.
- Returned location to original condition.
- Erected proper marker.

PXA Apr. 23, 1967

DVR	<input type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HHM	<input type="checkbox"/>
JAM	<input type="checkbox"/>
LD	<input checked="" type="checkbox"/>

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

SIGNED

Barbara Dodson

TITLE

Records Manager

DATE

May 12, 1967

(This space for Federal or State office use)

APPROVED BY

W. Rogers

TITLE

Director

DATE

MAY 17 1967

CONDITIONS OF APPROVAL, IF ANY:

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