

cc: Marietta Office  
STATE OF COLORADO  
OIL AND GAS CONSERVATION COMMISSION  
DEPARTMENT OF NATURAL RESOURCES

RECEIVED

MAY 15 1985

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION & SERIAL NO. - COLO. OIL & GAS CONSV. COMM.	
2. NAME OF OPERATOR Okmar Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBES COMM. -	
3. ADDRESS OF OPERATOR P. O. Box 5850, Denver, Colorado 80217 (303) 295-2323		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 SESW, 915'FSL & 1744'FWL, Section 29, T2N, R56W At proposed prod. zone same		8. FARM OR LEASE NAME Huey	
14. PERMIT NO. - 11/29/57 (date)		9. WELL NO. 22	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4426'GR		10. FIELD AND POOL, OR WILDCAT Burr	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 29, T2N, R56W	
		12. COUNTY Morgan	13. STATE Colorado

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF* <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(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.)

18. Date of work \_\_\_\_\_ \* Must be accompanied by a cement verification report.

The subject well was originally permitted and operated by H. L. Hunt. It is proposed that the subject well be plugged and abandoned as follows:

1. Fill 5½" casing with sand to approximately 5050' (TD: 5295' ) and set a 10 sack cement plug on top of sand.
2. Fill hole with mud.
3. Set a 10 sack cement plug in surface casing to 3' below ground level.
4. Cut off casing below plow depth and weld on cap.

19. I hereby certify that the foregoing is true and correct  
SIGNED J. Roy White TITLE Western Operations Manager DATE May 10, 1985

(This space for Federal or State office use)  
APPROVED BY William Smith TITLE DIRECTOR DATE MAY 17 1985  
CONDITIONS OF APPROVAL, IF ANY: O & G Cons. Comm.

