

OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES
OF THE STATE OF COLORADO

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

RECEIVED

APR 3 1973



00226624

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER 2. NAME OF OPERATOR Miami Oil Producers, Inc. 3. ADDRESS OF OPERATOR P. O. Drawer 2040, Abilene, Texas 79604 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface approximate center SE/4NW/4 Sec. 17, At proposed prod. zone T. 7 N., R. 67 W.		5. LEASE DESIGNATION AND SERIAL NO. Patented lands 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME H. Gordon Howard, Trustee 9. WELL NO. 1 10. FIELD AND POOL, OR WILDCAT Wildcat 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T.7N., R.67W.	
14. PERMIT NO. 71-410	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5052' K.B.	12. COUNTY Weld	13. STATE Colorado

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 checked="" type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
(Other) <input checked="" type="checkbox"/> change of operator	

(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.)

Date of work _____

Miami Oil Producers, Inc. is releasing this oil and gas lease to the lessors and is conveying the pipe in the hole and the equipment on the lease to the landowner, H. Gordon Howard, Trustee. Accordingly, it is requested that you approve the plugging bond covering the above well submitted by the new operator, H. Gordon Howard, Trustee, and that you release Miami Oil Producers, Inc. and its surety from their obligations on the bond presently held by you covering this well.

DVR	
FIP	✓
WIM	✓
LAM	✓
MO	✓

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

SIGNED

TITLE Attorney - AgentDATE April 2, 1973

(This space for Federal or State office use)

APPROVED BY

TITLE

DIRECTOR

DATE

APR 4 1973

CONDITIONS OF APPROVAL, IF ANY:

well is shut in - advised Larry tomorrow he advises us as to what will be done.