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OGCC FORM 4

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.



00226624

COLORADO OIL & GAS CONSV. COMM.

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

2. NAME OF OPERATOR H. Gordon Howard  
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., E., M., OR BLK. AND SURVEY OR AREA  
Sec. 17, T.7N., R.67W.

12. COUNTY  
Weld

13. STATE  
Colorado

14. PERMIT NO.  
71-410

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
5052' K.B.

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 type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>change of operator</u>	
(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.)

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.

*W.O. 10 Jan Howard  
Lamps Taylor phone  
no need for 10 schedule*

DVR	
FIP	✓
WHM	✓
JAM	✓
MO	✓

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

SIGNED Dayard B. Taylor TITLE Attorney - Agent DATE April 2, 1973

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DIRECTOR DATE APR 4 1973

CONDITIONS OF APPROVAL, IF ANY:

*well is shut in -  
advised Lamps to make sure he advises us  
as to what will be done.*