

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

RECEIVED

FEB 25 1989

FOR OFFICE USE			
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in duplicate for Patented and Federal lands.  
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 type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Source		5. LEASE DESIGNATION & SERIAL NO.
2. NAME OF OPERATOR H&R Well Services, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 0902 Rd 4, Wiggins, Colo 80654		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 At proposed prod. zone NE SW		8. FARM OR LEASE NAME Gress
14. PERMIT NO. 75-907		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		10. FIELD AND POOL, OR WILDCAT New Windsor
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 35-7N-67W
		12. COUNTY Weld
		13. STATE Colo

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 type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL, (Other) <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 2/1/89

\* Must be accompanied by a cement verification report.

Cleaned out obstruction in well.  
 Set CIBP @ 4350 and 2 sacks.  
 Cut casing at freepoint.  
 Laid down casing.  
 Ran tubing to 1100', and spotted 25 sacks.  
 Laid tubing to 350', and spotted 25 sacks.  
 Laid casing down to the base of surface at 176', and spotted 20 sacks.  
 Spotted 5 sacks at surface.  
 Cut the wellhead off 4' down, and welded a plate.  
 Bacfilled the hole. dug deadmen.

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

PRINT Dave Kel. I  
 SIGNED D.S. R.H. TITLE Secretary DATE 2/15/89  
 (This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY: