



00226779

OGCC FORM 4

Rev. 1/78

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

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

FOR OFFICE USE			
ET	FE	UC	SE
	N		

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"/>	7. UNIT AGREEMENT NAME New Windsor
2. NAME OF OPERATOR H+K Well Services, Inc	8. FARM OR LEASE NAME Brunner
3. ADDRESS OF OPERATOR 0902 Rd 4, Wiggins Colo	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface NW SW Same	10. FIELD AND POOL, OR WILDCAT New Windsor
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 26-7N-67W
14. PERMIT NO. 74-945	15. ELEVATIONS (Show whether DF, RT, GR, etc.)
	12. COUNTY Weld
	13. STATE Colo

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON

☐

REPAIR WELL

☐

CHANGE PLANS:

☐

(Other)

Status

☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

(Other)

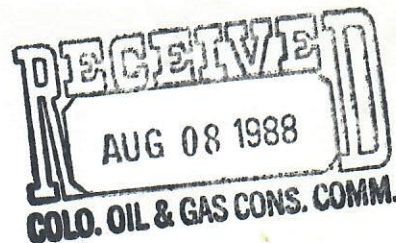
(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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.

Well is shut in. Operator plans to test,
evaluate for production. If not, P+A.



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

PRINT

Dave Rebol

SIGNED

[Signature]

TITLE

Secretary

DATE

8/3/88

(This space for Federal or State office use)

APPROVED BY

[Signature]

TITLE

SUPR. PETROLEUM ENGINEER

Oil & Gas Cons. Comm.

DATE

AUG 09 1988

CONDITIONS OF APPROVAL, IF ANY:

STATUS REPORT REQUIRED
EVERY 6 MONTHS ON SHUT-IN
& TEMPORARILY ABANDONED WELLS.