

(075-05834)

**OIL AND GAS CONSERVATION COM
OF THE STATE OF COLORADO**



RECEIVED

MAY 5 - 1967

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

5. LEASE DESIGNATION AND SERIAL NO.

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 ☒ Water injection

2. NAME OF OPERATOR

Guest & Moller Oil Company

3. ADDRESS OF OPERATOR

4726 Jacksboro Hwy, Wichita Falls, Texas 76302

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below.)

At surface

330' S/L 330' W/L NE/4 C-SW SW NE

At proposed prod. zone

Muddy

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4177' GL

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Luft

8. FARM OR LEASE NAME

D. M. Knudson

9. WELL NO.

15 WI

10. FIELD AND POOL, OR WILDCAT

Luft

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 17, T8N - R53W

12. COUNTY OR PARISH 13. STATE

Logan

Colorado

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)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT

(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.)

Well plugged as specified on our approved abandonment procedure.

Recovered 3244' 5 1/2" on 1-8-67. Surface marker placed in surface pipe.

DVR	<input checked="" type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
HMM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>

EX
Oil
Prod



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

SIGNED

TITLE Partner

DATE 5-3-67

(This space for Federal or State office use)

APPROVED BY

TITLE Director

DATE

JUN 7 1967

CONDITIONS OF APPROVAL, IF ANY: