

SEP 3 1985

COLO. OIL &amp; GAS CONS. COMM.

OGCC FORM 4



00230508

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.

# 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"/>		5. LEASE DESIGNATION & SERIAL NO.	
2. NAME OF OPERATOR Timka Resources, Ltd.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 1326 Webster Ave. Ft. Collins, CO 80524		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		8. FARM OR LEASE NAME Claycomb	
10. FIELD AND POOL, OR WILDCAT Big Bend Prospect		9. WELL NO. 1-A	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 2: T3S-R61W		12. COUNTY Adams	
13. STATE CO		14. PERMIT NO.	
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	

16.

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL.

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON

CHANGE PLANS:

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Perforation of new zone

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

REPAIRING WELL.

ALTERING CASING

ABANDONMENT\*

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 October 17, 1984

\* Must be accompanied by a cement verification report.

Shot 6' 6630-36 2 shots per foot J



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

SIGNED

TITLE President/OwnerDATE 08/29/85

(This space for Federal or State office use)

APPROVED BY

TITLE

DIRECTOR  
O & G Cons. Comm.

DATE

CONDITIONS OF APPROVAL, IF ANY:

SEP 10 1985