

OIL AND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADO

File in duplicate
File in triplicate



RECEIVED
APR 27 1965

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 checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR Horizon Oil & Gas Co.		6. INDIAN ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 7, Spearman, Texas 79081		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 C/NW/4, Section 34, Township 33S, Range 42W At proposed prod. zone Baca County, Colorado		8. FARM OR LEASE NAME Kerr
14. PERMIT NO. 3792x&xk		9. WELL NO. #1-34
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3972 G.L.		10. FIELD AND POOL, OR WILDCAT Midway
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA C/NW/4, Sec. 34, 33S, 42W
		12. COUNTY OR PARISH Baca
		18. STATE Colorado

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/> Temporarily Abandoned	

(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.)

DVR	
WRS	
HHM	
JAM	<input checked="" type="checkbox"/>
FJP	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
FILE	

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

SIGNED Fred R. Gray TITLE Production Manager DATE April 19, 1965

(This space for Federal or State office use)

APPROVED BY W. Rogers TITLE Director DATE APR 29 1965

CONDITIONS OF APPROVAL, IF ANY:

CGLO. OIL & GAS COMM.