



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

RECEIVED

JAN 3 1973

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR Horizon Oil & Gas Co. of Texas		6. IF 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 1980' f/North & 1980' f/East line At proposed prod. zone Perfs 3160 to 3170		8. FARM OR LEASE NAME State "#"
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3961 K.B.	9. WELL NO. #1-16
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT Flank Northwest Walsh
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.)		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 16, 33S-43W
		12. COUNTY Baca
		13. STATE Colorado

NOTICE OF INTENTION TO :

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <u>Plug.</u>	

SUBSEQUENT REPORT OF :

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
(Other)	

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

Date of work December 19, 1972

2-7/8" Casing Landed @3276
 Set 30 sx cement Plug @3160 to 1476
 Set 10 sx cement Plug @600' to surface
 Cut off 36" below ground level and weld on cap.

DVR	
FJP	✓
HHM	
JAM	✓
JJD	✓

WELL D & A LAST REPORT

G.H. Gas

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

SIGNED *Ernest R. Shaw* TITLE Production Manager DATE 12-27-72

(This space for Federal or State office use)

APPROVED BY *W. Rogers* TITLE DIRECTOR DATE JAN 5 1973

CONDITIONS OF APPROVAL, IF ANY: