

00595239 COLORADO  
**OIL AND GAS CONSERVATION COMMISSION**  
DEPARTMENT OF NATURAL RESOURCES

FOR OFFICE USE			
ET	FE	UC	SE

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.)

<p>1. <input type="checkbox"/> OIL WELL    <input type="checkbox"/> GAS WELL    <input checked="" type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR Horizon Oil &amp; Gas Co.</p> <p>3. ADDRESS OF OPERATOR P.O. Box 7, Spearman, Texas 79081</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface                    SE/4 NW/4 SE/4 At proposed prod. zone    1322' FSL and 1334' FEL</p>	<p>5. LEASE DESIGNATION &amp; SERIAL NO.</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME Cogburn</p> <p>9. WELL NO. #1-21</p> <p>10. FIELD AND POOL, OR WILDCAT Midway-Morrow</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 21-T33S-R42W</p>	
<p>14. PERMIT NO. Unknown</p>	<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3817-K.B.</p>	<p>12. COUNTY Baca</p> <p>13. STATE Colo.</p>

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) <u>well shut-in</u> <input type="checkbox"/>	

(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 has been shut-in due to low gas price received for gas.  
Shut-in date October, 1983.

RECEIVED

APR 06 1990

COLO. OIL & GAS CONS. COMM.

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

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

PRINT Curtis F. Covington

SIGNED Curtis F. Covington TITLE Engineer DATE 3-30-90

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: