



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

SUBMIT ORIGINAL AND 1 COPY

FOR OFFICE USE ONLY			
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**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.)

5. FEDERAL/INDIAN OR STATE LEASE NO.



1.  OIL WELL  GAS WELL  COALBED METHANE  INJECTION WELL  OTHER

6. PERMIT NO.

2. NAME OF OPERATOR  
Crystal Exploration and Production Co.

7. API NO.

05-123-9973

3. ADDRESS OF OPERATOR  
P. O. Box 21101

8. WELL NAME

Hamilton

CITY	STATE	ZIP CODE
Shreveport,	LA	71120

9. WELL NUMBER

43-11

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface

10. FIELD OR WILDCAT

Fosston

At proposed prod. zone

12. COUNTY

Weld

11. QTR. QTR. SEC., T.R. AND MERIDIAN

C NE/4 NE/4 Sec. 11-7N-63W

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

13A. NOTICE OF INTENTION TO:

- PLUG AND ABANDON
- MULTIPLE COMPLETION
- COMMINGLE ZONES
- FRACTURE TREAT
- REPAIR WELL
- OTHER \_\_\_\_\_

13B. SUBSEQUENT REPORT OF:

- FINAL PLUG AND ABANDONMENT (SUBMIT 3RD PARTY CEMENT VERIFICATION AND JOB LOG)
  - ABANDONED LOCATION (WELL NEVER DRILLED - SITE MUST BE RESTORED WITHIN 6 MONTHS)
  - REPAIRED WELL
  - OTHER
- \* Use Form 5 - Well Completion or Recompletion Report and Log for subsequent report of Multiple/Commingled Completions and Recompletions

13C. NOTIFICATION OF:

- SHUT-IN, TEMPORARILY ABANDONED (DATE 9/19/80) (REQUIRED EVERY 6 MONTHS)
- PRODUCTION RESUMED (DATE \_\_\_\_\_)
- LOCATION CHANGE (SUBMIT NEW PLAT)
- WELL NAME CHANGE
- OTHER \_\_\_\_\_

14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (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)

15. DATE OF WORK \_\_\_\_\_

\*Well has never produced, waiting on pipeline connection since September, 1980.

**RECEIVED**

FEB 12 1990

COLO. OIL & GAS CONS. COMM.

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

SIGNED Dawn Gardner TELEPHONE NO. 318-222-7791

NAME (PRINT) Dawn Gardner TITLE Supervisor Proration/Regulation DATE 2-7-90

(This space for Federal or State office use)

APPROVED Stephan Pott TITLE Sr. Engr. DATE 2/15/90  
CONDITIONS OF APPROVAL, IF ANY:

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

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