



00277977

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

081-06052

Form approved. Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

C-0114840

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Klaenhammer Unit

9. WELL NO.

1

10. FIELD AND POOL, OR WILD CAT

Powder Wash

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 22 T11N R97W

12. COUNTY OR PARISH Moffat

13. STATE Colorado

14. PERMIT NO.

68 111

DATE ISSUED

7/19/68

15. DATE SPUDDED

5/8/68

16. DATE T.D. REACHED

5/23/68

17. DATE COMPL. (Ready to prod.)

PXA 5/26/68

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\*

7099' GL 7110' RDB

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

7500

21. PLUG, BACK T.D., MD & TVD

22. IF MULTIPLE COMPL., HOW MANY\*

-

23. INTERVALS DRILLED BY

Surface to 11'

ROTARY TOOLS

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

Dry Hole

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

IES and GR-Sonic with caliper

27. WAS WELL CORED

Yes

28. CASING RECORD (Report all strings set in well)

Table with columns: CASING SIZE, WEIGHT, LE./FT., DEPTH SET (MD), HOLE SIZE, CEMENTING RECORD, AMOUNT PULLED. Data: 8-5/8", 24#, 345', 12-1/4", 350 sacks Type G.

29. LINER RECORD

Table with columns: SIZE, TOP (MD), BOTTOM (MD), SACKS CEMENT\*, SCREEN (MD). Includes handwritten entries: Dyr, FJP, HMM, JAM, JID.

30. TUBING RECORD

Table with columns: SIZE, DEPTH SET (MD), PACKER SET (MD).

31. PERFORATION RECORD (Interval, size and number)

Table with columns: PERFORATION RECORD (Interval, size and number). Includes handwritten entries: Dyr, FJP, HMM, JAM, JID.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

Table with columns: DEPTH INTERVAL (MD), AMOUNT AND KIND OF MATERIAL USED.

33.\* PRODUCTION

Table with columns: DATE FIRST PRODUCTION, PRODUCTION METHOD, WELL STATUS, DATE OF TEST, HOURS TESTED, CHOKE SIZE, PROD'N. FOR TEST PERIOD, OIL-BBL., GAS-MCF., WATER-BBL., GAS-OIL RATIO, FLOW. TUBING PRESS., CASING PRESSURE, CALCULATED 24-HOUR RATE, OIL-BBL., GAS-MCF., WATER-BBL., OIL GRAVITY-API (CORR.).

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

J. E. LANG

TITLE

Area Superintendent

DATE

5/27/68

\*(See Instructions and Spaces for Additional Data on Reverse Side)

# INSTRUCTIONS

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

**Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**Item 29: "Sacks Cement":** Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

**Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

### 37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
DST #1 - 3010-3023	Initial open recovery	30 min TO 30 min	FSI 30 min No blow No fluid
	Tool plugged		
DST #2 - 3010-3023	TO 1 hr.	FSI 30 min	Open tool x good blow decreasing to zero in 40 min
		Rec 2000'	No oil and no gas IFF 452
		FFP 876, FSIP 888	INP 1605 FHP 1570
Core #1 - 6925-85	Shale		

### 38.

### GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Ft Union	5628	