

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

RECEIVED
JAN 03 1984



00271714

File one copy for Patented, Federal and Indian lands.
File in duplicate for State lands.

COLO. OIL & GAS COMM. 167409

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____

b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESVR. Other P & A

2. NAME OF OPERATOR
UNIOIL

3. ADDRESS OF OPERATOR
3817 Carson Street, Evans, Colorado 80620

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface NE/SE 660' FEL & 1980' FSL
At top prod. interval reported below
At total depth Same

5. LEASE DESIGNATION AND SERIAL NO.
167409 COMM.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Dixon

9. WELL NO.
#1

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
Sec. 27-T9N-R68W

14. PERMIT NO. _____ DATE ISSUED _____

12. COUNTY
Larimer

13. STATE
CO

15. DATE SPUDDED
10-12-83

16. DATE T.D. REACHED
10-18-83

17. DATE COMPL. (Ready to prod. or Plug & Abd.)
10-18-83

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)
5225 GL

19. ELEV. CASINGHEAD
5235' K.B.

20. TOTAL DEPTH, MD & TVD
6668'

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

22. IF MULTIPLE COMPL., HOW MANY

23. INTERVALS DRILLED BY

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

25. WAS DIRECTIONAL SURVEY MADE
3 1/2° @ T.D.

26. TYPE ELECTRIC AND OTHER LOGS RUN
DIFL CDL SIMULT GR

27. WAS WELL CORED YES NO (Submit analysis)
DRILL STEM TEST YES NO (See reverse side)

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
<u>8-5/8</u>	<u>36#</u>	<u>339 K.B.</u>	<u>12 1/4</u>	<u>260 SX</u>	<u>0</u>

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

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

33. PRODUCTION

DATE FIRST PRODUCTION _____ PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) _____ WELL STATUS (Producing or shut-in) P & A

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 Jim Goad by PNY TITLE Vice-President DATE 12-29-83

WRS
FJP
HHM
JAM
RCC
LAR
COM
ED