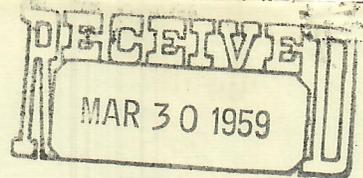


3 - OGCC
 OGCC Form #1 - Ed Marker
 1 - Bob Boeke1
 1 - File



OIL AND GAS CONSERVATION COMMISSION
 OF THE STATE OF COLORADO



OIL & GAS
 CONSERVATION COMMISSION

WELL COMPLETION REPORT

INSTRUCTIONS

Within thirty (30) days after the completion of any well, the owner or operator shall transmit to the Director three (3) copies of this form, for wells drilled on Patented or Federal lands and four (4) copies for wells drilled on State lands. Upon request, geological information will be kept confidential for six months after the filing thereof.

Field Buckingham Operator Eastern Petroleum Company
 County Weld Address 2520 1st Nat'l. Bk. Bldg.
 City Denver 2 State Colorado

Lease Name Olin Castor Well No. 1 Derrick Floor Elevation _____
 Location C SE/4 SW/4 Section 27 Township 8N Range 59W Meridian 6th Prin.
 (quarter quarter) feet from S Section line and 1980 feet from W Section Line
 N or S E or W

Drilled on: Private Land Federal Land State Land
 Number of producing wells on this lease including this well: Oil _____; Gas _____
 Well completed as: Dry Hole Oil Well Gas Well
 The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Date March 23, 1959 Signed [Signature]
 Title Assistant Division Engineer
 The summary on this page is for the condition of the well as above date.
 Commenced drilling January 28, 1959 Finished drilling February 14, 1959

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
8 5/8	28.00	H 40	184	150	24 hrs.		
4 1/2	11.60	J 55	6784	150	72 hrs.		

CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	Zone		FILE
		From	To	
				AJJ
				DVR
				WRS
				HHM
				JAM
				FJP
				JJD
				FILE

TOTAL DEPTH 6787 PLUG BACK DEPTH 6784

Oil Productive Zone: From _____ To _____ Gas Productive Zone: From _____ To _____
 Electric or other Logs run _____ Date _____, 19____
 Was well cored? _____ Has well sign been properly posted? _____

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL, EXPLOSIVE OR CHEMICAL USED	QUANTITY	ZONE		FORMATION	REMARKS
			From	To		

Results of shooting and/or chemical treatment: _____

DATA ON TEST

Test Commenced _____ A.M. or P.M. _____ 19____ Test Completed _____ A.M. or P.M. _____ 19____
 For Flowing Well: For Pumping Well:
 Flowing Press. on Csg. _____ lbs./sq.in. Length of stroke used _____ inches.
 Flowing Press. on Tbg. _____ lbs./sq.in. Number of strokes per minute _____
 Size Tbg. _____ in. No. feet run _____ Diam. of working barrel _____ inches
 Size Choke _____ in. Size Tbg. _____ in. No. feet run _____
 Shut-in Pressure _____ Depth of Pump _____ feet.

If flowing well, did this well flow for the entire duration of this test without the use of swab or other artificial flow device? _____

TEST RESULTS: Bbls. oil per day _____	API Gravity _____
Gas Vol. _____ Mcf/Day;	Gas-Oil Ratio _____ Cf/Bbl. of oil
B.S. & W. _____ %;	Gas Gravity _____ (Corr. to 15.025 psi & 60°F)

SEE REVERSE SIDE

dup

4 - 0000
1 - 0000
1 - 0000
1 - 0000

FORMATION RECORD

Give name, top, bottom and description of all formations encountered, and indicate oil, gas and water bearing intervals, cored sections and drill stem tests.

FORMATION NAME	TOP	BOTTOM	DESCRIPTION AND REMARKS
Niobrara	5972		Sand & shale
Base Cordell		6282	Sand & shale
Greenhorn	6508	6572	
Bentonite	6604	6608	Bentonite
"D" Sand	6714	6732	Sand, Oil
			<p>Core: 6714 - 39 Rec. 6" Sand, non-perm., no show 2" Sand, slight show 2" Shaley sand 1" Sand, calcareous 5"6" Sand, brown, saturated 6"6" Shale</p>
			<p>DST: 6715 - 39, open 3 hrs., rec. gas 2 3/4 hrs., 540° mud, 90° heavy oil & gas cut mud, 270° drilling filtrate, BHP 602 lbs. = 1 hr.</p>
T. D.		6787	

THIS RESULTS - 1000 psi per bar
 Gas Vol. _____
 Gas Density _____
 (Convert to 14.7 psi & 60° F)