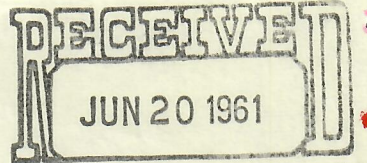




OIL AND GAS CONSERVATION COMMISSION  
OF THE STATE OF COLORADO

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 West Padroni Operator Sinclair Oil & Gas Company  
County Logan Address P. O. Box 9  
City Fort Morgan State Colorado  
Lease Name Francis Parke Well No. 4 Derrick Floor Elevation 4050' GL 4041'  
Location SW NE Section 6 Township 9N Range 52W Meridian 6PM  
(quarter quarter)  
1980 feet from N. Section line and 1980 feet from E. 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 2; Gas 0  
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 June 19, 1961

Signed Byron L. P. [Signature]  
Title District Engineer

The summary on this page is for the condition of the well as above date.

Commenced drilling 3-14, 19 61 Finished drilling 3-21, 19 61

CASING RECORD -

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
<u>8-5/8"</u>	<u>22.71#</u>	<u>Armco SW</u>	<u>284'</u>	<u>225</u>	<u>12 Hrs.</u>	<u>2 Hrs.</u>	<u>600</u>

CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	Zone	
		From	To
	<u>None.</u>		

TOTAL DEPTH 5082' PLUG BACK DEPTH None.

Oil Productive Zone: From None. To   Gas Productive Zone: From None. To    
Electric or other Logs run Induction-Electrical & Microlog Date 3-21, 19 61  
Was well cored? No. Has well sign been properly posted? None.

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL, EXPLOSIVE OR CHEMICAL USED	QUANTITY	ZONE		FORMATION	REMARKS
			From	To		
	<u>None.</u>					

Results of shooting and/or chemical treatment:

DATA ON TEST

Test Commenced   A.M. or P.M. None. 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 None. 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



of all formations encountered. This is

INSTRUCTIONS

## PLUGGING RECORD

Notes

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT