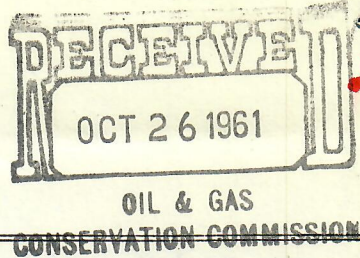


OIL AND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADO



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 Wildcat Operator ALAMO CORPORATION
County Routt Address P.O. Box 208
City Vernal State Utah

Lease Name Simos-State Well No. 1 Derrick Floor Elevation 7202
Location NW/4, NE/4 Section 9 Township 7N Range 86W Meridian 6th PM
(quarter quarter)
1210 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 _____; 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 Oct 24, 1961 Signed William J. Madgen
Title GEOLOGIST

The summary on this page is for the condition of the well as above date.
Commenced drilling July 11, 1961 Finished drilling Oct. 19, 1961

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
13 3/8"	48#	J55	150' GLM	90	48hrs		
8 5/8"	32#	J55	2274' GLM	none	(recovered all)		

CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	Zone	
		From	To
	None		

TOTAL DEPTH 3006 PLUG BACK DEPTH _____

Oil Productive Zone: From None To _____ Gas Productive Zone: From None To _____
Electric or other Logs run Gamma Ray - Neutron Date Oct. 19, 1961
Was well cored? No Has well sign been properly posted? Yes

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL, EXPLOSIVE OR CHEMICAL USED	QUANTITY	ZONE		FORMATION	REMARKS
			From	To		
	None					AJJ
						DVR
						WRS
						HHM
						JAM
						FJP
						JJD
						FIInches.

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 _____
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? _____

SEE REVERSE SIDE

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)

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.

[illegible]