

JUN 11 1980

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DEPARTMENT OF NATURAL RESOURCES

STATE OF COLORADO

State for Patented and Federal lands.
 Duplicate for State lands.

COLO. OIL & GAS CON. COMM.

LEASE DESIGNATION AND SERIAL NO.

05 075 08829

IF INDIAN ALLOTTEE OR TRIBE NAME

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 _____

2. NAME OF OPERATOR

Romac Exploration Co., Inc., & Exeter Drilling Northern, Inc.

3. ADDRESS OF OPERATOR

P. O. Box 17349, Denver, Colorado 80217 TA

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface 660' FWL 1980' FNL, Sec. 19-8N-51W

At top prod. interval reported below

At total depth

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

State

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

Unnamed

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

SW NW 19-8N-51W

14. PERMIT NO.

80 314

DATE ISSUED

3/24/80

15. DATE SPUDDED

3/10/80

16. DATE T.D. REACHED

3/15/80

17. DATE COMPL. (Ready to prod.)

3/15/80

(Plug & Abd.)

18. ELEVATIONS (DF, REB, RT, GR, ETC.)

4022' GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

4515'

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

22. IF MULTIPLE COMPL., HOW MANY

23. INTERVALS DRILLED BY

ROTARY TOOLS

XXX

CABLE TOOLS

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

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

IES, FDC-GR w/Caliper

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 PULPED
8-5/8"	24.0#	208'	12-1/4"	250 sx.	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

00216812

33. PRODUCTION

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

TITLE

Agent

DATE

6/9/80

See Spaces for Additional Data on Reverse Side

JUN 11 1980

OIL AND GAS CONSERVATION COMMISSION

DEPARTMENT OF NATURAL RESOURCES

OF THE STATE OF COLORADO

This is required for Licensed and Federal lands.
File in duplicate for State lands.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1. NAME OF WELL _____

2. TYPE OF COMPLETION: ☐ PERFORATION ☐ PACKER ☐ OTHER ☒ OTHER

3. NAME OF OPERATOR _____

4. LOCATION OF OPERATOR _____

5. LOCATION OF WELL (Report location through well log data requirements)

6. AS COMPLETION 660' F.M. 1980' F.M. Sec. 12-8N-51W

7. DATE OF COMPLETION _____

8. DATE OF LOG _____

9. DATE OF REPORT _____

10. DATE OF LOG _____

11. DATE OF REPORT _____

12. DATE OF LOG _____

13. DATE OF REPORT _____

14. DATE OF LOG _____

15. DATE OF REPORT _____

16. DATE OF LOG _____

17. DATE OF REPORT _____

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30. DATE OF LOG _____

31. DATE OF REPORT _____

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42. DATE OF LOG _____

43. DATE OF REPORT _____

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49. DATE OF REPORT _____

50. DATE OF LOG _____

51. DATE OF REPORT _____

52. DATE OF LOG _____

53. DATE OF REPORT _____

54. DATE OF LOG _____

55. DATE OF REPORT _____

56. DATE OF LOG _____

57. DATE OF REPORT _____

Date

6/11/81

Send For:

Form 4

Form 5

Cmt. Verif.

Form 10

Logs

Plat

Other

Requested by:

[Signature]

6/11/81
[Signature]