

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

BEST IMAGE
AVAILABLE



PLEASE DESIGNATION AND SERIAL NO.
NOV 18 1986
INDIAN ALLOTTEE OR TRIBE NAME
C.O.G. & GAS CON. COMM.

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

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 X A

2. NAME OF OPERATOR
Amoco Production Company

3. ADDRESS OF OPERATOR
Post Office Box 39200 Denver, Colorado 80239

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface 660' FEL, 660' FSL, SE SE SEC. 23
At top prod. interval reported below
At total depth
Murfin

6. FARM OR LEASE NAME
Champlin 205 Amoco "A"

9. WELL NO.
#7

10. FIELD AND POOL, OR WILDCAT
Grouse

11. SEC. T. R., M., OR BLOCK AND SURVEY OR AREA
SEC. 23-T15S-R46W

14. PERMIT NO. 84-1141 DATE ISSUED 12-22-84

12. COUNTY Cheyenne 13. STATE Co

15. DATE SPUDDED 10-11-84 16. DATE T.D. REACHED 11-5-84 17. DATE COMPLETED 10-1-86 (Plug & Abd.) 18. ELEVATIONS (DF, REB, RT, GR, ETC.) 4467' GR 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 5650' 21. PLUG BACK T.D., MD & TVD 5604' 22. IF MULTIPLE COMPL. HOW MANY _____ 23. INTERVALS DRILLED BY 0-TD ROTARY TOOLS _____ CABLE TOOLS NONE

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

25. WAS DIRECTIONAL SURVEY MADE
NO

26. TYPE ELECTRIC AND OTHER LOGS RUN
Mud, CBL, TDT, temp

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
9 5/8"	32.3#	1212' KB	12 1/4"	950 sx	none
5 1/2"	15.5#	5617'	7"	see Sundry 8-21-86	none

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET MD
					2 7/8"	5583'	pulled

31. PERFORATION RECORD (Interval, size and number)

5605'-5609', 5571'-5598' w/4JSPF
5370'-5372', 5418'-5420' w/8JSPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33. PRODUCTION

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

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 GR West/CB TITLE DISTRICT ADMINISTRATIVE SUPERVISOR DATE 11-17-86

