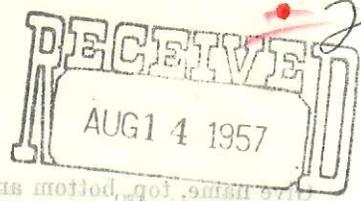


OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO



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 McKenzie Operator Don M. Rounds & Sanford Oil Company County Weld Address 925 Petroleum Club Bldg., City Denver State Colorado

Lease Name Government Well No. 1 Derrick Floor Elevation 4547' Location C NW NE Section 24 Township 9N Range 57W Meridian 6th P.M. 660 feet from N Section line and 1980 feet from E Section Line

Drilled on: Private Land [ ] Federal Land [x] State Land [ ] Number of producing wells on this lease including this well: Oil none; Gas none Well completed as: Dry Hole [x] 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 August 9, 1957 Signed Don M. Rounds & Sanford Oil Company Title Owner - Sanford Oil Company Commenced drilling May 29, 1957 Finished drilling June 10, 1957

CASING RECORD

Table with columns: SIZE, WT. PER FT., GRADE, DEPTH LANDED, NO. SKS. CMT., W.O.C., PRESSURE TEST Time, Psi. Row 1: 9 5/8", 32.30 lbs/ft., [ ], [ ], [ ], [ ], [ ], [ ]

CASING PERFORATIONS

Table with columns: Type of Charge, No. Perforations per ft., From, Zone, To

TOTAL DEPTH 6005' PLUG BACK DEPTH

Oil Productive Zone: From [ ] To [ ] Gas Productive Zone: From [ ] To [ ] Electric or other Logs run Electronic & Permalog Date 6/9 & 10, 1957 Was well cored? [ ] Has well sign been properly posted? yes

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

Table with columns: DATE, SHELL, EXPLOSIVE OR CHEMICAL USED, QUANTITY, ZONE (From, To), FORMATION, REMARKS

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: Flowing Press. on Csg. [ ] lbs./sq.in. Flowing Press. on Tbg. [ ] lbs./sq.in. Size Tbg. [ ] in. No. feet run [ ] Size Choke [ ] in. Shut-in Pressure [ ] For Pumping Well: Length of stroke used [ ] inches. Number of strokes per minute [ ] Diam. of working barrel [ ] inches. Size Tbg. [ ] in. No. feet run [ ] 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)

OIL AND GAS CONSERVATION COMMISSION  
OF THE STATE OF COLORADO  
**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.

INSTRUMENTS

FORMATION NAME	TOP	BOTTOM	DESCRIPTION AND REMARKS
Surface Gravel	0	220	
Pierre shale	220	5110	grey shale
Niobrara	5110	5361	Limey shale
Ft. Hayes	5361	5405	shale & white lime
Carlile	5405	5554	Grey shale
Greenhorn	5554	5580	sandy lime
grey shale	5580	5765	
Bentonite	5765	5770	white bentonite
Brown Lime	5770	5780	
Grey shale	5780	5870	
"D" Sand	5870	5790	sandy shale and silt
Grey shale	5790	5949	
"J" Sand	5949	6005	Tight gray to brown sand
Total Depth	6005		

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL EXPLOSIVE OR CHEMICAL USED	QUANTITY	NONE		REMARKS
			From	To	

DATA ON TEST

Test Completed \_\_\_\_\_ A.M. or P.M. \_\_\_\_\_  
 For Pumping Well: \_\_\_\_\_  
 Length of stroke used \_\_\_\_\_ inches  
 Number of strokes per minute \_\_\_\_\_  
 Diameter of working barrel \_\_\_\_\_ inches  
 Size of \_\_\_\_\_ in. No. \_\_\_\_\_  
 Depth of Pump \_\_\_\_\_ feet

TEST RESULTS: Rate of flow _____	Gas-Oil Ratio _____	Gas Gravity _____
Gas Vol _____	Water _____	Gas-Oil Ratio _____
Gas & Water _____	Gas Gravity _____	Gas-Oil Ratio _____