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OIL & GAS  
CONSERVATION COMMISSION

OIL AND GAS CONSERVATION COMMISSION  
OF THE STATE OF COLORADO

WELL COMPLETION REPORT



AJJ	
DVR	
WRS	
IM	
MM	
FJP	
JD	

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 The British-American Oil Prod Co  
 County Logan Address Box 180  
 City Denver 1, State Colorado  
 Lease Name COLORADO Well No. V-1 Derrick Floor Elevation 4317  
 Location SE NW Section 2 Township 10 N Range 53 W Meridian 6PM  
 (quarter quarter)  
1990 feet from North Section line and 1974 feet from West 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 0; 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 4-25-58 Signed [Signature]  
 Title District Superintendent

The summary on this page is for the condition of the well as above date.  
 Commenced drilling 3-27-, 1958 Finished drilling 4-3-, 1958

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
9-5/8	25.6	Armco	211'KB	175	24 hrs	30 mins	500

CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	Zone	
		From	To

TOTAL DEPTH 5211'KB PLUG BACK DEPTH \_\_\_\_\_

Oil Productive Zone: From DRY To \_\_\_\_\_ Gas Productive Zone: From DRY To \_\_\_\_\_  
 Electric or other Logs run Yes Date 4-4, 1958  
 Was well cored? NO Has well sign been properly posted? \_\_\_\_\_

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL, EXPLOSIVE OR CHEMICAL USED	QUANTITY	ZONE		FORMATION	REMARKS
			From	To		

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 \_\_\_\_\_ 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 \_\_\_\_\_ 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)

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**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.

INSTRUCTIONS

FORMATION NAME	TOP	BOTTOM	DESCRIPTION AND REMARKS
	0	215	Sandy clay
	215	4991	Shale and sandy shale
"D" Sand	4991	5039	Sand
	5039	5104	Sandy shale and sand
"J" Sand	5104	5175	Sand
	5175	5210	Shale and sandy shale

CASING RECORD

WT. PER FT.	GRADE	DEPTH LAPPED	NO. SRS. GMT.	W.O.C.	TIME	PS. TEST
25.6	3000	211.25	175	24 hrs	30 mins	500

CASING PERFORATIONS

TYPE OF CHANGE	NO. PERFORATIONS PER FT.	FROM	TO	ZONE

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL EXPLOSIVE OR CHEMICAL USED	QUANTITY	ZONE	FORMATION	REMARKS

DATA ON TEST

Test Completed \_\_\_\_\_ A.M. or P.M. \_\_\_\_\_  
 For Pumping Well: \_\_\_\_\_  
 Length of stroke used \_\_\_\_\_ inches  
 Number of strokes per minute \_\_\_\_\_  
 Diam. of working barrel \_\_\_\_\_ inches  
 Size of \_\_\_\_\_ in. No. test run \_\_\_\_\_  
 Size of \_\_\_\_\_ in.  
 Shot-in Pressure \_\_\_\_\_  
 If flowing well, did this well flow for the entire duration of this test without the use of swap or other artificial flow device? \_\_\_\_\_

TEST RESULTS: Bbls. oil per day _____	API Gravity _____
Gas Vol. _____	Gas-Oil Ratio _____
Gas Gravity _____	(Conv. to 15.025 psi & 60°F)