

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

Submit 1 copy



FOR OFFICE USE			
FILE	LC	SE	

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1. OPERATOR <u>Gils Hot Oil Service</u>	PHONE <u>303-622-9751</u>
ADDRESS <u>P.O. Box 145 Byers, Co. 80103</u>	
2. DRILLING CONTRACTOR <u>Gils Hot Oil Service</u>	PHONE

5. TYPE OF WELL	COALBED
<input type="checkbox"/> OIL <input type="checkbox"/> GAS <input type="checkbox"/> METHANE <input checked="" type="checkbox"/> DRY	
<input type="checkbox"/> INJECTION <input type="checkbox"/> OTHER	

6. TYPE OF COMPLETION <input type="checkbox"/> COMMINGLED
<input type="checkbox"/> NEW WELL <input type="checkbox"/> MULTIPLE COMPLETION
<input type="checkbox"/> RECOMPLETION STARTED (DATE)

7. FEDERAL/INDIAN OR STATE LEASE NO. <u>State 94-2232-S</u>
--

8. IF INDIAN, ALLOTTEE OR TRIBE NAME

3. LOCATION OF WELL (Footages from section lines)	4. ELEVATIONS KB <u>8120</u> GR <u>8117</u>	9. WELL NAME AND NUMBER <u>State 11-1</u>
At surface <u>330' FEL + 330' FNL</u>		10. FIELD OR WILDCAT <u>Canadian River</u>
At top prod. interval reported below		11. QTR. QTR. SEC. T. R. AND MERIDIAN <u>NE NE Sec 11-9N-78W</u>
At total depth <u>Same</u>		

WAS DIRECTIONAL SURVEY RUN? NO ☒ YES ☐ IF YES, ATTACH COPY

12. PERMIT NO. <u>96-391</u>	13. API NO. <u>050576372</u>	14. SPUD DATE <u>6-12-96</u>	15. DATE TD REACHED <u>8-5-96</u>	16. DATE COMPL. <input checked="" type="checkbox"/> D&A <input type="checkbox"/> READY TO PROD	17. COUNTY <u>Jackson</u>	18. STATE <u>CO.</u>
---------------------------------	---------------------------------	---------------------------------	--------------------------------------	--	------------------------------	-------------------------

19. TOTAL DEPTH MD <u>700'</u> TVD	20. PLUG BACK TOTAL DEPTH MD TVD	21. DEPTH BRIDGE PLUG SET MD TVD
---------------------------------------	-------------------------------------	-------------------------------------

22. TYPE ELECTRIC AND OTHER MECHANICAL LOGS RUN (Submit copy of each) <u>None</u>	23. WAS WELL CORED? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> (Submit Analysis) WAS DST RUN? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> (Submit Report)
--	---

24. CASING & LINER RECORD (Report all strings set in well)

SIZE	WEIGHT (LB/FT)	HOLE SIZE	TOP (MD)	BOTTOM (MD)	STAGE CEMENTER DEPTH	NO. OF SECS & TYPE OF CEMENT	SLURRY VOL. (BBL)	TOP OF CEMENT (Specify calc. or CBL)
<u>NO</u>		<u>6 1/4</u>	<u>0</u>	<u>700</u>				
<u>CSL</u>								
<u>RUN</u>								



25. TUBING RECORD - Please Specify # of Strings

SIZE	DEPTH SET (MD)	PACKER DEPTH (MD)	SIZE	DEPTH SET (MD)	PACKER DEPTH (MD)	SIZE	DEPTH SET (MD)	PACKER DEPTH (MD)

26. PRODUCING INTERVALS 27. ATTACH WELLBORE DIAGRAM FOR MULTI-ZONE/COMMINGLED PRODUCTION (RULE 332)

FORMATION	TOP	BOTTOM	GROSS PERFORATED INTERVAL	SIZE	NO. HOLES	PERF. STATUS (open, squeezed)
A)						
B)						
C)						
D)						

28. ACID, FRACTURE, TREATMENT, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND TYPE OF MATERIAL

29. PRODUCTION - INTERVAL A

DATE FIRST PRODUCED	TEST DATE	HOURS TESTED	TEST PRODUCTION	OIL BBL	GAS MCF	WATER BBL	OIL GRAVITY CORR. API	GAS DISPOSITION	PRODUCTION METHOD
			→						
CHOKE SIZE	FLOW. TBG. PRESS.	CSG. PRESS.	24 HR. RATE	OIL BBL	GAS MCF	WATER BBL	GAS: OIL RATIO	ZONE STATUS	
			→						

PRODUCTION - INTERVAL B

DATE FIRST PRODUCED	TEST DATE	HOURS TESTED	TEST PRODUCTION	OIL BBL	GAS MCF	WATER BBL	OIL GRAVITY CORR. API	GAS DISPOSITION	PRODUCTION METHOD
			→						
CHOKE SIZE	FLOW. TBG. PRESS.	CSG. PRESS.	24 HR. RATE	OIL BBL	GAS MCF	WATER BBL	GAS: OIL RATIO	ZONE STATUS	
			→						

COMPLETE AND SIGN BACK PAGE

PRODUCTION - INTERVAL C

DATE FIRST PRODUCED	TEST DATE	HOURS TESTED	TEST PRODUCTION →	OIL BBL	GAS MCF	WATER BBL	OIL GRAVITY CORR. API	GAS DISPOSITION	PRODUCTION METHOD
CHOKE SIZE	FLOW TBQ. PRESS.	CSG. PRESS.	24 HR. RATE →	OIL BBL	GAS MCF	WATER BBL	GAS: OIL RATIO	ZONE STATUS	

PRODUCTION - INTERVAL D

[illegible]

30. PLEASE ATTACH AN 8 1/2" x 11" BASIC SKETCH SHOWING ALL SURFACE EQUIPMENT ASSOCIATED WITH PRODUCTION, FLUID SEPARATION, FLUID STORAGE, AND GAS MEASUREMENT FOR THE WELL. SHOW APPROXIMATE DISTANCES OF EQUIPMENT FROM WELLBORE. INCLUDE WATER DISPOSAL PITS IF APPLICABLE. OUTLINE UNDERGROUND FLOWLINES AND LIST ANY OTHER WELLS SHARING THE SURFACE EQUIPMENT.

31. SUMMARY OF POROUS ZONES (INCLUDE AQUIFERS):

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES AND RECOVERIES.

32. FORMATION (LOG) MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTIONS, CONTENTS, ETC.	NAME	TOP
					MEAS. DEPTH
Pierre Shale	160'	700'	Shale		

33. ADDITIONAL REMARKS (INCLUDE PLUGGING PROCEDURE & ATTACH CEMENT VERIFICATION):

plug well with 50 sacks cement from 250' to surface using displacement method

: 34. CIRCLE ENCLOSED ATTACHMENTS:

34. CIRCLE ENCLOSED ATTACHMENTS:
- | | | |
|---------------------------------------|---------------------------------|---|
| 1. MECHANICAL LOGS (1 full set req'd) | 3. WELLBORE SKETCH
(See #27) | 6. SUNDRY NOTICE FOR PLUGGING AND CEMENT VERIFICATION |
| 2. GEOLOGIC REPORT | 4. DST REPORT | 7. CORE ANALYSIS |
| | 5. DIRECTIONAL SURVEY | 8. OTHER: |

35. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Millet Bone

TITLE

President

DATA

9-4-96