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OIL AND GAS CONSERVATION COMMISSION  
OF THE STATE OF COLORADORECEIVED  
DEC-1 1964  
OIL & GAS  
CONSERVATION COMMISSION

## 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 Un-named TOMAHAWK Operator DeKalb Agricultural Assn., Inc.  
County Logan Address 404 W. Illinois City Midland State Texas

Lease Name Kate Mathewson Well No. 1 Derrick Floor Elevation 4447  
Location NWSW Section 11 Township 9(N) Range 55W Meridian 6th  
1980 (quarter quarter) feet from S Section line and 660 feet from W Section Line  
Nor S Nor 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 November 30, 1964

Signed C. O. Bizzell Title Supt. of Production

The summary on this page is for the condition of the well as above date.

Commenced drilling October 30, 1964 Finished drilling November 6, 1964

## CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
8 5/8	20#	J-55	127	125	12	30 Min	750#

## CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	From	Zone	To	DVR
					WRS
					HHM
					JAM
					FJP
					JJD
					FILE

Oil Productive Zone: From \_\_\_\_\_ To \_\_\_\_\_ Gas Productive Zone: From \_\_\_\_\_ To \_\_\_\_\_  
Electric or other Logs run Induc. Elec. & Microlog Date 11-5, 1964  
Was well cored? Yes 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:

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)

SEE REVERSE SIDE

# 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.

FORMATION NAME	TOP	BOTTOM	DESCRIPTION AND REMARKS
Niobrara	4604	4977	
Ft. Hays	4977	5173	
Greenhorn	5173	5184	
"D" Sand	5437	5535	
"J" Sand	5535	5577	
Core # 1	5531-5567	Recovered 35½' of shale and reworked shale.	
Core # 2	5568-5575	Recovered 15½', bottom 10' sand.	
DST # 1	5568-5575	Recovered 200' oil and 1700' water.	