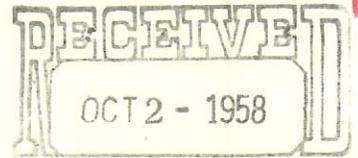




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OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO



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 Tow Creek Operator Cabeen Exploration Corp. County Routt Address 945 Petroleum Club Bldg. City Denver 2, State Colorado

Lease Name Bradley Well No. 5 Derrick Floor Elevation 6435* Location NW NE NW Section 18 Township 6N Range 86W Meridian 6th 335 feet from N Section line and 1545 feet from W Section Line

Drilled on: Private Land Federal Land State Land Number of producing wells on this lease including this well: Oil 4; 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 October 1, 1958 Signed [Signature] Title _____

The summary on this page is for the condition of the well as above date. Commenced drilling February 19, 19 58 Finished drilling March 26, 19 58

CASING RECORD

Table with columns: SIZE, WT. PER FT., GRADE, DEPTH LANDED, NO. SKS. CMT., W.O.C., PRESSURE TEST (Time, Psi)

CASING PERFORATIONS

Table with columns: Type of Charge, No. Perforations per ft., From, Zone, To, and a list of well logs (AJJ, DVR, WRS, HHM, JAM, FJP, JJD, FILE)

Oil Productive Zone: From 2736 To 2753 Gas Productive Zone: From _____ To _____ Electric or other Logs run Gamma Ray-Neutron Date March 21, 19 58 Was well cored? NO 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: Swabbed 5 BBL/hr.

DATA ON TEST

Test Commenced 8 A.M. or P.M. March 27 19 58 Test Completed 8 A.M. or P.M. March 29, 19 58 For Flowing Well: For Pumping Well: Flowing Press. on Csg. _____ lbs./sq.in. Length of stroke used 30 inches. Flowing Press. on Tbg. _____ lbs./sq.in. Number of strokes per minute 14.5 Size Tbg. _____ in. No. feet run _____ Diam. of working barrel 1.25 inches. Size Choke _____ in. Size Tbg. 2-1/2 in. No. feet run 2815 Shut-in Pressure _____ Depth of Pump 2713 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 5 API Gravity 39 Gas Vol. TSTM _____ Mcf/Day; Gas-Oil Ratio _____ Cf/Bbl. of oil B.S. & W. Trace %; Gas Gravity _____ (Corr. to 15.025 psi & 60°F)

SEE REVERSE SIDE

Handwritten signature/initials

18-6N-86W

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
Mancos	Surface		Silty shales with minor tight sands.
Niobrara	2370*		Calcareous hard shales. Oil zone 2736-2753* fract. shale.
Carlisle	3305		Calcareous hard shales
TD	3392		

