



OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

RECEIVED FEB 26 1959 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 Plum Bush Extension River Operator B. F. Allison County Washington Address 626 Patterson Building City Denver State Colorado Lease Name MacNeill Well No. 2 Derrick Floor Elevation 4726 Location C SE NE Section 2 Township 3 S Range 56 Meridian 1980 (quarter quarter) feet from N Section line and 660 feet from E Section Line

Drilled on: Private Land [checked] Federal Land [] State Land [] Number of producing wells on this lease including this well: Oil 0; Gas 0 Well completed as: Dry Hole [checked] 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 12/16/58 2/23/59 Signed Dale John Thayer Title Agent

The summary on this page is for the condition of the well as above date. Commenced drilling 12/16/58, 19 Finished drilling 12/24/58, 19

CASING RECORD

Table with columns: SIZE, WT. PER FT., GRADE, DEPTH LANDED, NO. SKS. CMT., W.O.C., PRESSURE TEST (Time, Psi). Row 1: 8 5/8, 24, D, 99', [], [], [], []

CASING PERFORATIONS

Table with columns: Type of Charge, No. Perforations per ft., From, Zone, To. Includes TOTAL DEPTH 5163 and PLUG BACK DEPTH.

Vertical list of initials: AJJ, DVR, WRS, HHM, AM, FJP, JJD, FILE

Oil Productive Zone: From [] To [] Gas Productive Zone: From [] To [] Electric or other Logs run Schlumberger Date 12/24/58, 19 Was well cored? yes Has well sign been properly posted? []

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?

SEE REVERSE SIDE

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)

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	4068		
Ft. Hays	4514		
Carlile	4562		
Bentonite	4874		
"D" Sand	4971		
"J" Sand	5027		



CARTON EXCEEDS

SIZE	NO. TEST	GRADE	REMARKS
3 1/2	24	D	

TOTAL DEPTH	TYPE OF CHARGE
1100	

ON PRODUCTION NAME: FROM
 Name of other logs: No.
 Was well cored: Yes

RECORD OF SHOOTING AND/OR DRESSING TREATMENT

DATE	SHOOT EXPIRATIVE OR CHEMICAL USED	QUANTITY	ZONE

Results of shooting and/or dressing treatment:

TEST RESULTS: Oil per gal. _____ Gas vol. _____

Water per gal. _____ Solids per gal. _____