

Copy for Patented, Federal and Indian lands.
Duplicate for State lands.

FEB 4 1985



WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. LEASE DESIGNATION AND SERIAL NO.
COLO. OIL & GAS CONS.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Jolly

9. WELL NO.
#1-8

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA
Sec. 8, T3S-R55W

12. COUNTY Washington
13. STATE Colorado

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____

b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESRV. Other _____

2. NAME OF OPERATOR
Transcontinent Oil Company

3. ADDRESS OF OPERATOR
621 17th Street, Suite 1201, Denver, Co. 80293

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface 1680' FEL 660' FSL

At top prod. interval reported below
At total depth Same

NAME OF DRILLING CONTRACTOR
Orbit Drilling

14. PERMIT NO. 85-1562
DATE ISSUED Nov. 1, 1985

15. DATE SPUDDED 11-6-85
16. DATE T.D. REACHED 11-10-85
17. DATE COMPL. (Ready to prod.) 11-11-85 (Plug & Abd.)
18. ELEVATIONS (DF, REB, RT, GR, ETC.) K.B. -4677', G.L. -4668'
19. ELEV. CASINGHEAD ----

20. TOTAL DEPTH, MD & TVD 4951'
21. PLUG, BACK T.D., MD & TVD ----
22. IF MULTIPLE COMPL., HOW MANY
23. INTERVALS DRILLED BY
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)
25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN
Schlumberger-Dual Induction and FDC-GR
27. WAS WELL CORED YES NO (Submit analysis)
DRILL STEM TEST YES NO (See reverse side)

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24	130'	12 1/4"	125 sacks	-----

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33. PRODUCTION

DATE FIRST PRODUCTION
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)
WELL STATUS (Producing or shut-in)

DATE OF TEST
HOURS TESTED
CHOKE SIZE
PROD'N. FOR TEST PERIOD
OIL—BBL.
GAS—MCF.
WATER—BBL.
GAS-OIL RATIO

FLOW. TUBING PRESS.
CASING PRESSURE
CALCULATED 24-HOUR RATE
OIL—BBL.
GAS—MCF.
WATER—BBL.
OIL GRAVITY-API (CORR.)

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
TEST WITNESSED BY

35. LIST OF ATTACHMENTS

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

SIGNED [Signature] TITLE GEOL. DATE 1/8/86

Jim B

[Handwritten mark]

