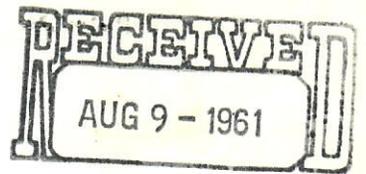




00611992

OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO



OIL & GAS CONSERVATION COMMISSION

~~CONFIDENTIAL~~ 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 Greenwood Operator Horizon Oil & Gas Co. County Baca Address Box 998 City Spearman State Texas

Lease Name Speaker Well No. 1 Derrick Floor Elevation 3584 Location SE SE NW Section 32 Township 34S Range 41 W Meridian 6th PM 2310 feet from N Section line and 2310 feet from W Section Line

Drilled on: Private Land [x] Federal Land [] State Land [] Number of producing wells on this lease including this well: Oil - ; Gas - Well completed as: Dry Hole [x] 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 8-8-61 Signed [Signature] Title Production Superintendent Commenced drilling 7-11, 1961 Finished drilling 7-19, 1961

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#, J55, 620, 300, 24, 30", 500.

CASING PERFORATIONS

Table with columns: Type of Charge, No. Perforations per ft., From, Zone, To. Row 1: NONE, [blank], [blank], [blank], [blank].

TOTAL DEPTH 3100 PLUG BACK DEPTH -

Oil Productive Zone: From - To - Gas Productive Zone: From - To - Electric or other Logs run Sonic - Laterolog Date 7-18-1961 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. Row 1: NONE, [blank], [blank], [blank], [blank], [blank].

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. 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 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
Tubb Zone	0	2422	Interbedded sands and shale
Neva	2422	2440	Limestone
Waubensee	2440	2800	Limestone & Shale
Topeka	2800	2888 2988	Limestone (water)
Lansing	2988	3100	Limestone
T. D.	3100		