

OIL AND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADO

WELL COMPLETION REPORT

INSTRUCTIONS



80075761

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 Pinneo Operator Wytex Oil Corporation
County Morgan Address 715 Bank of Commerce Building
City Houston State Texas
Lease Name Government Lease #02258 Well No. 1-15 Derrick Floor Elevation 4507
Location NW NE Section 15 Township 2 N Range 55 W Meridian 6th
(quarter quarter)
660 feet from N Section line and 1926 feet from E Section Line
N or S E or W

Drilled on: Private Land ☐ Federal Land ☒ State Land ☐Number of producing wells on this lease including this well: Oil 2; Gas _____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 10-19-56Signed W. A. McKenna, Jr.
Title W. A. McKenna, Jr. - Agent

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

Commenced drilling 8-3-55, 19____ Finished drilling 8-9-55, 19 ~~XX~~

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
8 5/8	24	J-55	121	300			
4 1/2	9.5	J-55	5105	150			

CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	Zone	
		From	To
Kone shots	4	4994	4998
		5001.5	5005.5

TOTAL DEPTH 5106PLUG BACK DEPTH 51064994 4998Oil Productive Zone: From 5001.5 To 5005.5 Gas Productive Zone: From - To -Electric or other Logs run yes Date 8-9-, 19 55Was well cored? yes Has well sign been properly posted? yes

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:

For Pumping Well:

Flowing Press. on Csg. _____ lbs./sq.in.

Length of stroke used _____ inches.

Flowing Press. on Tbg. _____ lbs./sq.in.

Number of strokes per minute _____

Size Tbg. _____ in. No. feet run _____

Diam. of working barrel _____ inches

Size Choke _____ in.

Size Tbg. _____ in. No. feet run _____

Shut-in Pressure _____

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 80 API Gravity 42
Gas Vol. 0 Mcf/Day; Gas-Oil Ratio 0 Cf/Bbl. of oil
B.S. & W. 18 %; Gas Gravity 0 (Corr. to 15.025 psi & 60°F)

FORMATION RECORD

of all formations encountered, and indic

FORMATION NAME	TOP	BOTTOM	DESCRIPTION AND REMARKS
Pierre Shale	121	4156	
Niobrara	4156	4489	
Ft Hays	4489	4542	
Carlile	4542	4632	
Greenhorn	4646	4653	
Benton	4653	4981	
"D"	4981	5014	
"J"	5054	5106	
Total depth	5106		

TEST NO DATA