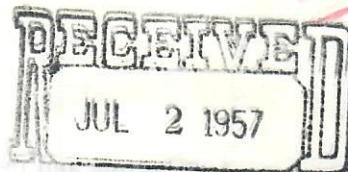




# OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

## WELL COMPLETION REPORT



### INSTRUCTIONS

OIL & GAS  
CONSERVATION COMMISSION

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 Wildcat Operator Love-Miller Drilling Co., Inc.  
County Morgan Address 712 Patterson Bldg.  
City Denver 2 State Colorado

Lease Name Schroeder Well No. 1 Derrick Floor Elevation 4385  
Location C NE/4 NE/4 Section 12 Township 2N Range 58W Meridian 6th P.M.  
(quarter quarter)  
660 feet from N Section line and 660 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 None; Gas None  
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 July 1, 1957

Signed A. J. Carson  
Title Secretary-Treasurer

The summary on this page is for the condition of the well as above date.  
Commenced drilling June 19, 19 57 Finished drilling June 26, 19 57

### CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
<u>10 3/4"</u>	<u>32.75#</u>	<u>4-40</u>	<u>154</u>	<u>135</u>	<u>14 hrs</u>		<u>500</u>

### CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	Zone	
		From	To

TOTAL DEPTH \_\_\_\_\_

PLUG BACK DEPTH \_\_\_\_\_

Oil Productive Zone: From \_\_\_\_\_ To \_\_\_\_\_ Gas Productive Zone: From \_\_\_\_\_ To \_\_\_\_\_  
Electric or other Logs run Induction-Electric & Microlog Date June 26, 19 57  
Was 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 57 Test Completed A.M. or P.M. 19 57  
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? \_\_\_\_\_

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)

5514  
4385  
1129

# 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	4768		
Ft. Hays	5066		
Carlile	5110		
Greenhorn	5340		
Base Bentonite	5419		
"D"	5514		
"J"	5582		
Total Depth	5707		