OGI 00599628

Reg

RECEIVED
JUL 28 1959
OIL & GAS
CONSERVATION COMMISSION

OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

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: Wildcat — Operator: The Clayton Oil Company
County: Washington — Address: 712 Patterson Building
City: Denver — State: Colorado

Lease Name: Federal-Rediess — Well No. 1 — Derrick Floor Elevation: 4460
Location: C NW/4 NE/4 (quarter quarter) — Section 7 — Township 2 N — Range 54 W — Meridian 6th
660 feet from N (N or S) Section line and 1980 feet from E (E or W) Section Line

Drilled on: Private Land ☐ Federal Land ☒ State Land ☐
Number of producing wells on this lease including this well: Oil 0; Gas 0
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 27, 1959 — Signed: A. J. Carson — Title: General Partner

The summary on this page is for the condition of the well as above date.
Commenced drilling: July 21, 19 59 Finished drilling: July 24, 19 59

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST Time	PRESSURE TEST Psi
8-5/8	24	0-55	101	85	12 hrs.		

AJJ
DVR
WRS
HHM
JAM
FJP
JJD
FILE

CASING PERFORATIONS

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

TOTAL DEPTH _____ PLUG BACK DEPTH _____

Oil Productive Zone: From _____ To _____ Gas Productive Zone: From _____ To _____
Electric or other Logs run: Electrical Survey & Microlog Date: July 24, 19 59
Was well cored? no Has well sign been properly posted? _____

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL, EXPLOSIVE OR CHEMICAL USED	QUANTITY	ZONE From	ZONE 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
Pierre	0	4044	Shale
Niobrara	4044	4336	Lime and shale
Ft. Hayes	4336	4400	Chalky lime
Carlile	4400	4496	Shale
Greenhorn	4496	4562	Sandy lime
Graneros	4562	4812	Shale
"D"Sand	4812	4846	Sandstone
"J" Sand	4884	5000	Sandstone