

OIL AND GAS CONSERVATION COMMISSION  
DEPARTMENT OF NATURAL RESOURCES  
OF THE STATE OF COLORADO

RECEIVED  
JAN 20 1984



File in triplicate for Patented and Federal lands.  
File in quadruplicate for State lands.

COLO. OIL & GAS CONS.

5. LEASE DESIGNATION AND SERIAL NO.  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
9. WELL NO.  
10. FIELD AND POOL, OR WILDCAT  
11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA  
12. COUNTY  
13. STATE

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other \_\_\_\_\_  
b. TYPE OF COMPLETION: NEW WELL  WORK OVER  DEEP-EN  PLUG BACK  DIFF. RESVR.  Other \_\_\_\_\_

2. NAME OF OPERATOR  
3. ADDRESS OF OPERATOR

R. E. HIBBERT

Albert E. Miller  
Miller 1-15  
Wildcat  
Sec. 15-T9N-R56W  
Washington  
Colorado

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)  
At surface SW NW  
At top prod. interval reported below  
At total depth

14. PERMIT NO. 82-914  
DATE ISSUED

12. COUNTY Washington  
13. STATE Colorado

15. DATE SPUNDED 5-26-82  
16. DATE T.D. REACHED 5-31-82  
17. DATE COMPL. (Ready to prod.) 6-1-82 (Plug & Abd.)  
18. ELEVATIONS (DF, RKB, RT, GR, ETC.) 4472 G.L.  
19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 5,892  
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 Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN IDL-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

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

WRS
FJP
HHM
JAM
RCC
LAR
CGM
ED

SIGNED \_\_\_\_\_ TITLE Mgr. Vactor DATE 1-16-84 2A

See Spaces for Additional Data on Reverse Side