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OIL AND GAS CONSERVATION COMMISSION  
OF THE STATE OF COLORADORECEIVED  
FEB 13 1970  
COLO. OIL & GAS CONS. COMM.

## 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 RANGELY Operator ED. F. DELANEY, OPERATOR  
County RIO BLANCO Address P.O. Box 734, Rangely, Colo. 81648  
City \_\_\_\_\_ State \_\_\_\_\_  
Lease Name ~~Richardson~~ Getty-Pan American Well No. 11-A Derrick Floor Elevation 5188  
Location Lot 5 (quarter quarter) Section 4 Township 1N Range 102W Meridian 6  
440 feet from N Section line and 1205 feet from W Section Line  
Nor S Nor W

Drilled on: Private Land ☐ Federal Land ☒ State Land ☐  
Number of producing wells on this lease including this well: Oil 4; Gas 2  
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 2/10/70Signed Pho to 7000 Allerton  
Title Agent

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

Commenced drilling 9-19-67, 19\_\_\_\_ Finished drilling 10-11-67, 19\_\_\_\_

## 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>45</u>     |       | <u>60</u>    | <u>None</u>   |        |               |     |
| <u>8-5/8</u>  | <u>30</u>     |       | <u>130</u>   | <u>20 sx</u>  |        |               |     |
| <u>5"</u>     | <u>15 1/2</u> |       | <u>2530</u>  | <u>None</u>   |        |               |     |

## CASING PERFORATIONS

| Type of Charge | No. Perforations per ft. | From | Zone | To | DVR        |                                     |
|----------------|--------------------------|------|------|----|------------|-------------------------------------|
|                |                          |      |      |    |            |                                     |
| <u>NONE</u>    |                          |      |      |    | <u>FJP</u> | <input checked="" type="checkbox"/> |
|                |                          |      |      |    | <u>HHM</u> | <input checked="" type="checkbox"/> |
|                |                          |      |      |    | <u>JAM</u> | <input checked="" type="checkbox"/> |
|                |                          |      |      |    | <u>LID</u> | <input checked="" type="checkbox"/> |

TOTAL DEPTH 2530 PLUG BACK DEPTH \_\_\_\_\_

Oil Productive Zone: From 0 To 0 Gas Productive Zone: From 2500 To 2508  
Electric or other Logs run \_\_\_\_\_ Date \_\_\_\_\_, 19\_\_\_\_  
Was well cored? No Has well sign been properly posted? \_\_\_\_\_

## RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

| DATE        | SHELL, EXPLOSIVE<br>OR CHEMICAL USED | QUANTITY | ZONE |    | FORMATION | REMARKS |
|-------------|--------------------------------------|----------|------|----|-----------|---------|
|             |                                      |          | From | To |           |         |
| <u>NONE</u> |                                      |          |      |    |           |         |
|             |                                      |          |      |    |           |         |
|             |                                      |          |      |    |           |         |

Results of shooting and/or chemical treatment: \_\_\_\_\_

## DATA ON TEST

Test Commenced NONE 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? \_\_\_\_\_

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)

gas



# 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            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--------|------------------------------------|
| Mancos                                                                                                                                                 | 0   | 45     | Surface clay, gravel & fresh water |
| Mancos                                                                                                                                                 | 45  | 2530   | Mancos Shale                       |
| NOTE: Well is closed in - High pressure fittings on Casing Head - Well capable of producing small amount of gas. May plug and abandon at a later date. |     |        |                                    |