



OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

RECEIVED MAY-8 1963

WELL COMPLETION REPORT

OIL & GAS CONSERVATION COMMISSION

INSTRUCTIONS

SCANNED

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 Xenia-North Operator Patrick A. Doheny
County Washington Address 136 El Camino
City Beverly Hills State California

Lease Name Renkel Well No. 4 Derrick Floor Elevation 4554 K.B.
Location SE NW Section 18 Township 2N Range 53W Meridian 6th
1661 feet from N Section line and 2230 feet from W Section Line

Drilled on: Private Land [X] Federal Land [] State Land []
Number of producing wells on this lease including this well: Oil 3 ; Gas
Well completed as: Dry Hole [X] 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 May 2, 1963 Signed G.W. Reed, Agent
Title G.W. Reed, Agent

The summary on this page is for the condition of the well as above date.
Commenced drilling 4/6, 19 63 Finished drilling 4/10, 19 63

CASING RECORD

Table with columns: SIZE, WT. PER FT., GRADE, DEPTH LANDED, NO. SKS. CMT., W.O.C., PRESSURE TEST (Time, Psi)

CASING PERFORATIONS

Table with columns: Type of Charge, No. Perforations per ft., From, Zone, To. Includes sub-table for casing logs (DVR, WRS, HHA, JAM, FJP, JJD, FILE).

Oil Productive Zone: From To Gas Productive Zone: From To
Electric or other Logs run Electric Log and Microlog Date April 10, 19 63
Was well cored? No Has well sign been properly posted?

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

Table with columns: DATE, SHELL, EXPLOSIVE OR CHEMICAL USED, QUANTITY, ZONE (From, 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: 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 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)

SEE REVERSE SIDE

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	SAMPLE TOP	ELECTRIC BOTTOM LOG	DATUM	DESCRIPTION AND REMARKS
Niobrara		3941	+ 613	
Fort Hays		4299	+ 255	
Carlisle		4354	+ 200	
Greenhorn		4448	+ 106	
"D" Sand	4777	4776	- 222	
"J" Sand	4854	4852	- 298	
Total Depth	4940	4937	- 383	
DST NO. 1	<p>The test was a straddle packer test from 4862 feet to 4868 feet, the total depth being 4937 feet Electric Log measurements.</p> <p>The tool was open for a two hour period with no gas appearing at the surface. The fluid recovery was 750 feet of water with no oil or gas indications in the drill pipe.</p> <p>The recorded pressures were as follows:</p> <p>Initial shut in-----474 psi-----30 minutes Initial flow-----53 psi Final flow-----336 psi Final shut in-----459 psi-----30 minutes</p>			



DATA ON TEST

Name of Driller: _____ Date: _____

Name of Operator: _____

Name of Recorder: _____