



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 Second Creek Operator Jack Rouse
County Adams Address 911 Midland Savings Bldg.
City Denver 2, State Colorado
Lease Name Box Elder Well No. 2 Derrick Floor Elevation 5447 K.B.
Location C NW NW Section 10 Township 3 So. Range 65 W. Meridian 6th
660 feet from N Section line and 660 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 none; Gas none
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 April 3, 1957 Signed [Signature] Title

The summary on this page is for the condition of the well as above date.
Commenced drilling December 2, 1956 Finished drilling December 21, 1956

CASING RECORD

Table with columns: SIZE, WT. PER FT., GRADE, DEPTH LANDED, NO. SKS. CMT., W.O.C., PRESSURE TEST (Time, Psi). Row 1: 10-3/4", 36., H-40, 210', 150, 24 hrs.

CASING PERFORATIONS

Table with columns: Type of Charge, No. Perforations per ft., From, Zone, To

TOTAL DEPTH PLUG BACK DEPTH

Oil Productive Zone: From To Gas Productive Zone: From To
Electric or other Logs run Electric and Induction Date Dec. 20, 1956
Was well cored? yes Has well sign been properly posted? yes

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

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

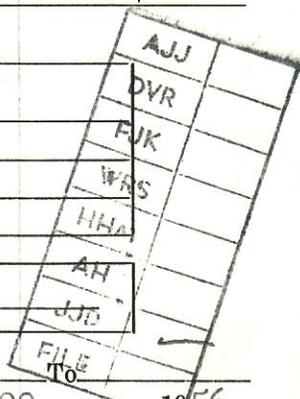
Results of shooting and/or chemical treatment:

DATA ON TEST

Test Commenced A.M. or P.M. 19 Test Completed A.M. or P.M. 19
For Flowing Well: 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?

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.

INSTRUCTIONS

FORMATION NAME	TOP	BOTTOM	DESCRIPTION AND REMARKS
	1574	1574	Shale
		1584	Coal
Fox Hills	1584	1770	SS.
	1770	5250	Shale
Hygiene	5250	5385	SS.
	5385	7581	Shale
Niobrara	7581	7856	Shale, oil loader 7780 to 7810
Timpas	7856	7874	Limestone, some flu.
Codell	7874	7885	Tr. flu.
	7885	8262	Shale
1st Bn. Dakota	8262	8271	SS., quartzitic, tight, Vert. frac. good odor, some flu., bled oil and gas
	8271	8305	Shale
2nd B. Dakota	8305	8314	SS. some flu.
	8314	8318	Shale
3rd Bn. Dakota	8318	8365	SS., tight, quartzitic, V.F., some gas odor, bled gas 8323 to 8329
	8365	8380	Shale

NO. OF TESTS	W.O.C.	NO. OF TESTS	DEPTH	GRADE	WT. PER FT.	SIZE
NO DRILL STEM TEST.						

NO. OF TESTS	W.O.C.	NO. OF TESTS	DEPTH	GRADE	WT. PER FT.	SIZE

REMARKS	FORMATION	NO. OF TESTS	DEPTH	GRADE	WT. PER FT.	SIZE

DATA ON TEST

Test Commenced _____ A.M. or P.M. _____
 Test Completed _____ A.M. or P.M. _____
 For Drilling Well: _____
 Length of stroke used _____ inches
 Number of strokes per minute _____
 Diameter of working barrel _____ inches
 Size of _____ in No. feet run _____
 Depth of pump _____ feet

Gas Vol	Mc/Day	Gas-Oil Ratio	Grav. of oil
Pressure	psi	Grav. of gas	API Gravity