



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 S. D. Johnson
County Washington Address 219 Midland Savings Bldg.
City Denver 2, State Colo.
Lease Name Wiant Well No. 1 Derrick Floor Elevation 4421 KB
Location C NE NE Section 33 Township 3S Range 19W Meridian 62
660 feet from N Section line and 660 feet from E Section Line 4421 GL

Drilled on: Private Land [x] Federal Land [] State Land []
Number of producing wells on this lease including this well: Oil []; 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 6-1-62 Signed [Signature] Title Off. Mgr.

The summary on this page is for the condition of the well as above date.
Commenced drilling 1-10-62, 19 Finished drilling 1-15-1962

CASING RECORD

Table with columns: SIZE, WT. PER FT., GRADE, DEPTH LANDED, NO. SKS. CMT., W.O.C., PRESSURE TEST (Time, Psi). Row 1: 8-5/8, 21#, A, 259', 150.

CASING PERFORATIONS

Table with columns: Type of Charge, No. Perforations per ft., From, Zone, To. Includes rows for HHM, JAM, FJP, JJD and summary rows for TOTAL DEPTH (3835) and PLUG BACK DEPTH.

Oil Productive Zone: From [] To [] Gas Productive Zone: From [] To []
Electric or other Logs run Ind. Elect. Date 1-14-62, 19
Was well cored? Yes [x] 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: 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)

SEE REVERSE SIDE

Handwritten signature 'Lato'

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
Niobrara	2790		
Ft. Hays	3237		
Base Codell	3298		
Greenhorn	3404		
Bentonite	3589		
D	3677		
J	3734		
T.D.	3835		
			Core #1 3758- 3769
			1' lt gr med gr ss, good p & p, good St & Fl.
			10' Gr med gr sh ss, tg, no shows.
			DST #1 3736- 3746
			Open 30 Min, shut-in 30 min. recovered 1320 ft of water
			InFP 115#
			FFP 606
			Shut-in 608
			Hyd 2035