



Oil and Gas Conservation Commission

DEPARTMENT OF NATURAL RESOURCES

COMPLETED INTERVAL REPORT

RECEIVED
JUL 17 00

This form is to be submitted or updated each time a new formation is completed or abandoned. This form shall be transmitted within thirty (30) days of work. Additional information is found under Rule 308. Complete a section for each formation completed or recompleted including all attempted completions. Attach as many pages as required to fully describe the work.

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Complete the Attachment Checklist

OGCC Operator Number: 72085	Contact Name & Phone	Wellbore diagram	Oper	OGCC
Name of Operator: Prima Oil & Gas Company	TINA MILLER	Site Facility Diagram		
Address: 1801 Broadway, Suite 500	No: (303) 297-2300			
City: Denver State: CO Zip: 80202	Fax: (303) 297-7708			
API Number : 05- 123-19008-00				
Well Name: State Clark	Number: 36-21			
Location (QtrQtr, Sec, Twp, Rng, Meridian): NENW 36-5N-65W, 6th PM		List in order of completion.		

FORMATION: Codell Producing ☒ Y ☐ N ☐ Commingled ☐ OGCC

Perforations Gross Interval: Top	Bottom	No. Holes:	Size:	Open Hole Completion
Reperfed 7010'	7020'	40	3 1/8 slgun	

Formation Treatment Describe:
Refraced Codell w/252,523# of 20/40 sand, using 117,050 gal. Of Vistar 22#, 20#, and 18# gel.

Test Information	Date: 10/26/99	Hours: 24	Bbls Oil: 18	MCF Gas: 347	Bbls H2O: 2
Production Test Method: Flowing	Casing Pressure: 680#	Flowing Tubing Pressure: 590#	Choke Size 12/64		
API Gravity Oil:	BTU Gas:	Gas Disposition: sold			
Calculated 24 Hr Rate	Bbls Oil: 18	MCF Gas: 347	Bbls H2O: 2	GOR: 19,275	
Production Method: Flowing					
Tubing Size: 2 1/16	Setting Depth: 7005'	Packer Depth:			
Non-producing Completion Status: <input type="checkbox"/> Abd <input type="checkbox"/> SI Reason shut in:					
Abandonment of Zone Date:		Squeezed:	Sacks Cement:		
Bridge Plug Depth:		Sacks Cement on Top:			

FORMATION: Producing ☐ Y ☐ N ☐ Commingled ☐ OGCC

Perforations Gross Interval: Top	Bottom	No. Holes:	Size:	Open Hole Completion

Formation Treatment Describe:

Test Information	Date:	Hours:	Bbls Oil:	MCF Gas:	Bbls H2O:
Production Test Method:	Casing Pressure:	Flowing Tubing Pressure:	Choke Size		
API Gravity Oil:	BTU Gas:	Gas Disposition:			
Calculated 24 Hr Rate	Bbls Oil:	MCF Gas:	Bbls H2O:	GOR:	
Production Method:					
Tubing Size:	Setting Depth:	Packer Depth:			
Non-producing Completion Status: <input type="checkbox"/> Abd <input type="checkbox"/> SI Reason shut in:					
Abandonment of Zone Date:		Squeezed:	Sacks Cement:		
Bridge Plug Depth:		Sacks Cement on Top:			

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name TINA MILLER

Signed Tina Miller Title: Engineering Technician Date: 7/14/00

STATE CLARK 36-21

PRIMA OIL & GAS 7/14/2000

