

OIL AND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADO

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WELL COMPLETION REPORT

OIL & GAS
CONSERVATION COMMISSION

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 Davis Oil Company
 County Logan County Address 802 Midland Savings Building
 City Denver State Colorado
 Lease Name Knopp Well No. 1 Derrick Floor Elevation 4247
 Location C NW NW Section 24 Township 7N Range 49W Meridian 6th P.M.
660 feet from N Section line and 660 feet from W Section Line
 N or S E or W

Drilled on: Private Land Federal Land State Land
 Number of producing wells on this lease including this well: Oil none; Gas none
 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.

Signed Greg C. Ramsey
 Title Geologist

Date _____
 Commenced drilling 4/14/57, 19____ Finished drilling 4/18/57, 19____

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
8 5/8			224	175			

CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	Zone	
		From	To
TOTAL DEPTH <u>4303</u>		PLUG BACK DEPTH _____	

Handwritten notes and stamps: AJJ, OVR, FIK, WRS, HHA, AH, JJD, FILE

Oil Productive Zone: From _____ To _____ Gas Productive Zone: From _____ To _____
 Electric or other Logs run Permalog and Electric Log Date 4/18/ 1957
 Was well cored? no Has well sign been properly posted? yes

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL, EXPLOSIVE OR CHEMICAL USED	QUANTITY	ZONE		FORMATION	REMARKS
			From	To		

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

FORMATION RECORD

24-71-19W

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
"D" Sand	4110	4175	Sand, fine grained light gray, fair P&P, water wet
"J" Sand	4230	4290	Sand medium grained, good P&P, tan water wet.

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CNT.	W.O.C.	PRESSURE TEST
8 5/8			224	175		

CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	From	To
TOTAL DEPTH 1303		PLUG BACK DEPTH	

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL EXPLOSIVE OR CHEMICAL USED	QUANTITY		FORMATION	REMARKS
		From	To		

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: _____
 Shut-in Pressure _____
 Size Choke _____ in.
 Size Tpg _____ in. No. test run _____
 Flowing Press. on Tpg _____ lbs./sq.in.
 Flowing Press. on Csg _____ lbs./sq.in.
 Length of stroke used _____ inches.
 Number of strokes per minute _____
 Diam. of working barrel _____ inches.
 Size Tpg _____ in. No. test run _____
 Depth of Pump _____ feet.

TEST RESULTS: Bbl. oil per day _____	API Gravity _____
Gas Vol. _____ Mcf/Day _____	Gas-Oil Ratio _____
B.S. & W. _____ %	Gas Gravity _____ (Corr. to 15.025 psi & 60°F)
	Grav. of oil _____

SEE REVERSE