



OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

OIL & GAS CONSERVATION COMMISSION

WELL COMPLETION REPORT

AJJ	
DVR	<input checked="" type="checkbox"/>
WRS	
HHM	
JAM	
FIP	
JJD	<input checked="" type="checkbox"/>

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 Kingwood Oil Company  
 County Routt Address First National Building  
 City Oklahoma City State Oklahoma  
 Lease Name George W. Wheeler Well No. 1 Derrick Floor Elevation 6925'  
 Location C NE SE Section 6 Township 7N Range 85W Meridian 6th  
1980 feet from S Section line and 660 feet from E Section Line  
 N or S S E or W E

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 Ben Spain  
 Title Chief Clerk  
 Date October 19, 1960

The summary on this page is for the condition of the well as above date.  
 Commenced drilling September 18, 1960 Finished drilling October 5, 1960

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
13-3/8			585'	None			
10-3/4			1473'	None			

CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	Zone	
		From	To
	None		

TOTAL DEPTH 1750' PLUG BACK DEPTH \_\_\_\_\_

Oil Productive Zone: From None To \_\_\_\_\_ Gas Productive Zone: From None To \_\_\_\_\_  
 Electric or other Logs run No Date \_\_\_\_\_, 19\_\_\_\_  
 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: 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)

OIL AND GAS CONSERVATION COMMISSION  
OF THE STATE OF COLORADO  
**FORMATION RECORD**

6-7W-8500

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
	0	1474	Shale
	1474	1565	Sand & sandy shale
	1565	1580	Shale
	1580	1640	Siltstone
	1640	1695	Sand
	1695	1710	Silt
	1710	1750	Silt & sand

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. STKS. CNT.	W.O.C.	PRESSURE TEST
10-3/4"			1473'	None		
12-3/8"			585'	None		

CASING PERFORATIONS

Type of Change	No. Perforations per ft.	From	To
None			

TOTAL DEPTH 1750' PLUG BACK DEPTH

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

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

DATA ON TEST

Test Commenced \_\_\_\_\_ A.M. or P.M. \_\_\_\_\_ 19\_\_\_\_  
 For Flowing Well: \_\_\_\_\_  
 Flowing Press. on Csg. \_\_\_\_\_ lbs./sq.in.  
 Flowing Press. on Tpg. \_\_\_\_\_ lbs./sq.in.  
 Size Tpg. \_\_\_\_\_ in. No. test run \_\_\_\_\_  
 Size Choke \_\_\_\_\_ in.  
 Shut-in Pressure \_\_\_\_\_  
 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 _____
Gas Gravity _____	(Conv. to 15.925 psi & 60°F)