

		26	
		X	

Locat
Well
Correc

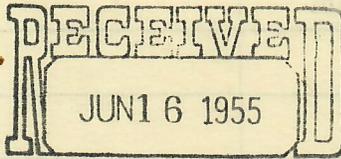


00792083

in triplicate on Fee and Patented lands and in quadruplicate on State and School lands, with

OFFICE OF DIRECTOR

OIL AND GAS CONSERVATION COMMISSION,
STATE OF COLORADO



LOG OF OIL AND GAS WELL

OIL & GAS
CONSERVATION COMMISSION

Field Wildcat Company Stanolind Oil and Gas Company
 County Washington Address Box 458, Brush, Colorado
 Lease Joseph E. Kejr "B"
 Well No. 1 Sec. 26 Twp. 3S Rge. 56W Meridian 6 P.M. State or Pat. Pat.
 Location 2017 Ft. ^(N) 181 of South Line and 1989 Ft. ^(W) 181 of East line of Sec Elevation 4837
 (Derrick floor relative to sea level)

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 J. A. Wilson

Date June 14, 1955 Title Field Superintendent

The summary on this page is for the condition of the well as above date.

Commenced drilling May 31, 19 55 Finished drilling June 10, 19 55

OIL AND GAS SANDS OR ZONES

No. 1, from None to _____ No. 4, from _____ to _____
 No. 2, from _____ to _____ No. 5, from _____ to _____
 No. 3, from _____ to _____ No. 6, from _____ to _____

IMPORTANT WATER SANDS

No. 1, from _____ to _____ No. 3, from _____ to _____
 No. 2, from _____ to _____ No. 4, from _____ to _____

CASING RECORD

SIZE	WT. PER FOOT	MAKE	WHERE LANDED	NO. OF SKS. CEMENT	STOOD HOURS	PRESSURE TEST PSI
<u>8-5/8</u>	<u>29.35</u>	<u>8VT line pipe</u>	<u>195</u>	<u>165</u>	<u>24</u>	<u>400</u>

COMPLETION DATA

Total Depth 5260 ft. Cable Tools from _____ to _____ Rotary Tools from Surface to T.D.
 Casing Perforations (prod. depth) from _____ to _____ ft. No. of holes _____
 Acidized with _____ gallons. Other physical or chemical treatment of well to induce flow _____
 Shooting Record _____

Prod. began None 19 ____ Making _____ bbls./day of _____ A. P. I. Gravity Fluid on _____ Pump
 Tub. Pres. _____ lbs./sq. in. Csg. Pres. _____ lbs./sq. in. Gas Vol. _____ Mcf. Gas Oil Ratio _____ Choke.
 Length Stroke _____ in. Strokes per Min. _____ Diam. Pump _____ in.
 B. S. & W. _____ %. Gas Gravity _____ BTU's/Mcf. _____ Gals. Gasoline/Mcf. _____

WELL DATA

Indicate (yes or no) whether or not the following information was obtained.
 Electrical Log Yes Date June 9, 19 55 Straight Hole Survey Yes Type _____
 _____ Date _____ 19 ____ Other Types of Hole Survey _____ Type _____
 Time Drilling Record Geolograph
 Core Analysis No Depth _____ to _____
 _____ to _____

FORMATION RECORD

Show all formations, especially all sands and character and contents thereof.

FORMATION	TOP	BOTTOM	REMARKS

pfl

