

STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES



15

File one copy for Patented, Federal and Indian lands.
File in duplicate for State lands.

COLO. OIL & GAS CONSERVATION COMMISSION
LEASE DESIGNATION AND SERIAL NO.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____
 b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESVR. Other _____

2. NAME OF OPERATOR
Rincon Operating - Morgan Oil

3. ADDRESS OF OPERATOR
1580 Lincoln St. Sute 700 Denver, CO 80203

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface C SE SE Section 17
At top prod. interval reported below
At total depth
NAME OF DRILLING CONTRACTOR
J.W. Gibson

14. PERMIT NO. 801494 DATE ISSUED 10/27/80

15. DATE SPUDDED 11/26/80 16. DATE T.D. REACHED 12/6/80 17. DATE COMPL. (Ready to prod.) 12/7/80 (Plug & Abd.) 18. ELEVATIONS (DF, REB, RT, GR, ETC.) GR 5117'

20. TOTAL DEPTH, MD & TVD 6975' 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY --- 23. INTERVALS DRILLED BY --- ROTARY TOOLS 0-TD CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)
Dry

26. TYPE ELECTRIC AND OTHER LOGS RUN Dual SFL-FDC-CNC-GR 27. WAS WELL CORED YES NO (Submit analysis) DRILL STEM TEST YES NO (See reverse side)

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24#/ft	220	12 1/4	220sx	

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33. PRODUCTION DATE FIRST PRODUCTION Dry PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in)

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY

35. LIST OF ATTACHMENTS DST

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED [Signature] TITLE Agent DATE

DVR	<input checked="" type="checkbox"/>
FJP	<input type="checkbox"/>
HJM	<input checked="" type="checkbox"/>
JAM	<input checked="" type="checkbox"/>
JJD	<input checked="" type="checkbox"/>
RLS	<input type="checkbox"/>
CGM	<input type="checkbox"/>

