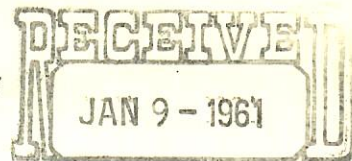


OIL AND GAS CONSERVATION COMMISSION  
OF THE STATE OF COLORADO

## WELL COMPLETION REPORT



OIL &amp; 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 NOONEN RANCH Operator GINTHER WARREN AND COMPANY  
County ADAMS Address 2438 BANK OF SOUTHWEST BUILDING  
City HOUSTON State TEXAS

Lease Name UPRR NOONEN Well No. 3 Derrick Floor Elevation 5169  
Location SW SW Section 13 Township 3S Range 59W Meridian 6<sup>th</sup> PM  
(quarter quarter)  
900 feet from SOUTH Section line and 660 feet from WEST 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 2; Gas \_\_\_\_\_  
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.

Date 5 Jan 61 Signed JAW  
Title \_\_\_\_\_

The summary on this page is for the condition of the well as above date.  
Commenced drilling 8-19-60 8-19-60, 19 \_\_\_\_\_ Finished drilling 8-31-60 8-31-60, 19 \_\_\_\_\_

## CASING RECORD

| SIZE  | WT. PER FT. | GRADE | DEPTH LANDED | NO. SKS. CMT. | W.O.C. | PRESSURE TEST |     |
|-------|-------------|-------|--------------|---------------|--------|---------------|-----|
|       |             |       |              |               |        | Time          | Psi |
| 8 5/8 | 23 POUNDS   | H-40  | 134          | 150           | 24     |               |     |
| 5 1/2 | 14 POUNDS   | J-55  | 6274         | 125           | 24     |               |     |

## CASING PERFORATIONS

| Type of Charge | No. Perforations per ft. | From | Zone | To |
|----------------|--------------------------|------|------|----|
| CASING NOTCH   |                          | 6178 |      |    |
|                |                          |      |      |    |
|                |                          |      |      |    |

TOTAL DEPTH 6275 PLUG BACK DEPTH 6205

Oil Productive Zone: From 6176 To 6185 Gas Productive Zone: From \_\_\_\_\_ To \_\_\_\_\_  
Electric or other Logs run ELECTRIC - MICRO Date \_\_\_\_\_, 19 \_\_\_\_\_  
Was well cored? YES 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 |           |  |         |
|      |                                   |          |      |    |           |  | DVR     |
|      |                                   |          |      |    |           |  | WRS     |
|      |                                   |          |      |    |           |  | HMM     |
|      |                                   |          |      |    |           |  | JAM     |
|      |                                   |          |      |    |           |  | FJP     |
|      |                                   |          |      |    |           |  | JJD     |
|      |                                   |          |      |    |           |  | FILE    |

Results of shooting and/or chemical treatment: \_\_\_\_\_

## DATA ON TEST

Test Commenced 8 A.M. or P.M. DECEMBER 20 19 60 Test Completed \_\_\_\_\_ A.M. or P.M. \_\_\_\_\_  
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 54 inches.  
Number of strokes per minute 16  
Diam. of working barrel 1 1/2 inches  
Size Tbg. 2 in. No. feet run 6150  
Depth of Pump 6140 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? \_\_\_\_\_

SEE REVERSE SIDE

TEST RESULTS: Bbls. oil per day 18 API Gravity 40  
Gas Vol. 10 Mcf/Day; Gas-Oil Ratio \_\_\_\_\_ Cf/Bbl. of oil  
B.S. & W. 80 %; Gas Gravity \_\_\_\_\_ (Corr. to 15.025 psi & 60°F)



# FORMATION RECORD

Give name, top, bottom and description of all formations encountered, and indicate oil, gas and water bearing intervals, cored sections and drill stem tests.

| FORMATION NAME | TOP  | BOTTOM | DESCRIPTION AND REMARKS |
|----------------|------|--------|-------------------------|
| NIOKRARA       | 5280 | 5500   | SH.                     |
| FT HAYS        | 5660 | 5710   |                         |
| BROWN LINE     | 5996 | 5998   |                         |
| D SAND         | 6078 | 6146   | SAND TIGHT              |
| J SAND         | 6159 | ----   | SAND TIGHT              |