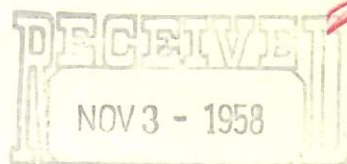


OIL AND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADO

WELL COMPLETION REPORT

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 Midwest Oil Corporation
County Washington Address 1700 Broadway
City Denver State Colorado
Lease Name John H. Price Well No. 1 Derrick Floor Elevation 4682
Location C NW SE Section 3 Township 3S Range 56W Meridian 6E
2025 feet from S Section line and 1972 feet from E 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 _____; 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.

Date October 29, 1958

Signed Courtney S Cook
Title District Engineer

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

Commenced drilling May 30, 1958 Finished drilling June 3 1958

CASING RECORD

| SIZE | WT. PER FT. | GRADE | DEPTH LANDED | NO. SKS. CMT. | W.O.C. | PRESSURE TEST | |
|---------------|-------------|-------------|--------------|---------------|-----------|---------------|-------------|
| | | | | | | Time | Psi |
| <u>10 3/4</u> | <u>32</u> | <u>J-55</u> | <u>99</u> | <u>120</u> | <u>24</u> | <u>10</u> | <u>1000</u> |
| | | | | | | | |
| | | | | | | | |

CASING PERFORATIONS

| Type of Charge | No. Perforations per ft. | From | Zone | To |
|----------------|--------------------------|------|------|----|
| | | | | |
| | <u>None</u> | | | |
| | | | | |

TOTAL DEPTH 5199

PLUG BACK DEPTH _____

Oil Productive Zone: From _____ To _____ Gas Productive Zone: From _____ To _____
Electric or other Logs run Electric Induction, Micro Date June 3 1958
Was well cored? _____ 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 | | |
| | | | | | | |
| | | | <u>None</u> | | | |
| | | | | | | |

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? _____

SEE REVERSE SIDE

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)

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 |
|----------------|------|--------|---|
| "D" | 5000 | 5024 | No DST's |
| "J" | 5051 | 5183 | Cored "J" 5050-90', zero perms 85% W.S., 20% porosity, Zero oil sat. P & A |