

RECEIVED JUN 22 1960

OIL AND GAS CONSERVATION COMMISSION OF THE STATE OF COLORADO

WELL COMPLETION REPORT

OIL & 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 Wild cat Operator Huron Drilling Company, Inc. County Logan Address Suite 1120, 1700 Broadway City Denver 2 State Colorado

Lease Name Van Gundy Well No. 1 Derrick Floor Elevation Location NW/4 NE/4 Section 1 Township 7N Range 54W Meridian 6th PM 660 feet from N Section line and 1980 feet from E Section Line

Drilled on: Private Land [x] Federal Land [] State Land [] Number of producing wells on this lease including this well: Oil --- ; Gas --- Well completed as: Dry Hole [x] 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 June 21, 1960 Signed [Signature] Title Secretary-Treasurer

The summary on this page is for the condition of the well as above date. Commenced drilling August 19, 19 59 Finished drilling August 24, 19 59

CASING RECORD

Table with columns: SIZE, WT. PER FT., GRADE, DEPTH LANDED, NO. SKS. CMT., W.O.C., PRESSURE TEST (Time, Psi). Row 1: 8 5/8, Set 109', @115', K.B. 115', 125 W 2% Ca.CL, (Surface Casing)

CASING PERFORATIONS

Table with columns: Type of Charge, No. Perforations per ft., From, Zone, To. Includes a vertical list of casing types: AJJ, DVR, WRS, HHM, JAM, FJP, JJD, FILE.

Oil Productive Zone: From none To Gas Productive Zone: From none To Electric or other Logs run Schlumberger ES & Microlog Date August 23, 19 59 Was well cored? yes Has well sign been properly posted?

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

Table with columns: DATE, SHELL, EXPLOSIVE OR CHEMICAL USED, QUANTITY, ZONE (From, To), FORMATION, REMARKS. Row 1: none

Results of shooting and/or chemical treatment:

DATA ON TEST

Test Commenced A.M. or P.M. August 24 1959 Test Completed A.M. or P.M. August 24 19 59 For Flowing Well: none For Pumping Well: none 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 none 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)

