

OIL AND GAS CONSERVATION COMMISSION RECEIVED
OF THE STATE OF COLORADO



NOV 21 1968

File in triplicate for Patented and Federal lands.
File in quadruplicate for State lands.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

COLO. OIL & GAS CONSERVATION COMMISSION

5. LEASE DESIGNATION AND SERIAL NO. _____

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME _____

8. FARM OR LEASE NAME
Joe E. Veltri, Sr.

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
NE 1/4 NE 1/4 Section 17 T33S, R60W

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 **D & A**

2. NAME OF OPERATOR
Jack L. Story

3. ADDRESS OF OPERATOR
P. O. Box 1073, Dallas, Texas 75221

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface

At top prod. interval reported below

At total depth

14. PERMIT NO. **65 386** DATE ISSUED **9-10-65**

12. COUNTY OR PARISH **Las Animas** 13. STATE **Colorado**

15. DATE SPUDDED **9-12-65** 16. DATE T.D. REACHED **9-27-65** 17. DATE COMPL. (Ready to prod.) _____

18. ELEVATIONS (DF, REB, RT, GR, ETC.) _____ 19. ELEV. CASINGHEAD _____

20. TOTAL DEPTH, MD & TVD **547** 21. PLUG, BACK T.D., MD & TVD _____

22. IF MULTIPLE COMPL., HOW MANY _____ 23. INTERVALS DRILLED BY ROTARY TOOLS _____ CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) **0 - 547'**

25. WAS DIRECTIONAL SURVEY MADE **No**

26. TYPE ELECTRIC AND OTHER LOGS RUN **None run**

27. WAS WELL CORED **No**

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"	28#	100'	11 1/4"	Circulated	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

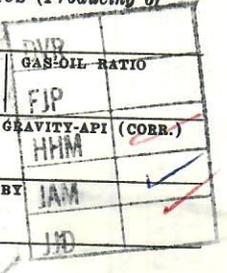
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

33. PRODUCTION

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

DATE OF TEST	HOURS TESTED	CHOKES 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 _____

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED **Jack L. Story** TITLE **Owner** DATE **11-19-68**

37. SUMMARY OF POROUS ZONES:
 SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES.

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Surface Hard lmy Sd	0 25	25 547	T.D.

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH