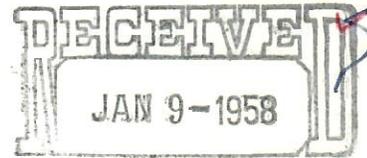




OIL AND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADO



WELL COMPLETION REPORT

INSTRUCTIONS

CONSERVATION COMMISSION

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 Rangely Operator The Chatham Oil Company
County Rio Blanco Address P. O. Box 204
City Rangely State Colorado

Lease Name M. V. Smith Well No. 18 Derrick Floor Elevation _____
* Location NW 1/4 of NW 1/4 Section 11 Township 1N Range 102W Meridian 6
(quarter quarter)
1620 feet from N Section line and 1660 feet from W 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 _____
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 January 2, 1958 Signed R.M. Galbreath
Title Manager

The summary on this page is for the condition of the well as above date.
Commenced drilling November 19, 1957 Finished drilling December 23, 1957

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
8"				4			

CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	Zone	
		From	To
	NONE		

TOTAL DEPTH 3,000 PLUG BACK DEPTH none

Oil Productive Zone: From 1780 To 1785
Electric or other Logs run 2633 To 2638 Gas Productive Zone: From none To _____
2715 2720 Date _____, 19____
Was well cored? no Has well sign been properly posted? _____

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL, EXPLOSIVE OR CHEMICAL USED	QUANTITY	ZONE		FORMATION	REMARKS
			From	To		
	NONE					

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)

*Note -- description as corrected by the Geological Survey office.

Prod.

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
From	To	Total Ft.	
MANCOS			
0	1035	1035	Dark shale
1035	1700	665	Dark blue shale
1700	1780	80	Gray shale
1780	1785	5	Oil show very light
1785	1900	115	Gray shale
1900	2095	195	Light shale
2095	2633	538	Light blue shale
2633	2638	5	Oil show, small
2638	2715	77	Dark shale
2715	2720	5	5 bbls. of oil per day
2720	3000	280	Dark shale
			TD 3000 feet.
			On standby, on bailer test
			it made approx. 4 b.o.p.d.