

OIL & GAS

WELL COMPLETION REPORT

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.

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.

CASING RECORD

CASING PERFORATIONS

Oil Productive Zone: From _____ To _____ Gas Productive Zone: From _____ To _____ FILE
 Electric or other Logs run _____ Date _____, 19____
 Was well cored? _____ Has well sign been properly posted? _____

Results of shooting and/or chemical treatment: _____

NONE

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
NIOBRARA	4712	5020	
CARLILE	5074	5246	
BENTONITE	5432	5434	
"D" SAND	5620	5548	
"J" SAND		T. D.	