

OIL AND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADORECEIVED
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OIL & GAS
CONSERVATION COMMISSION

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 AMBASSADOR OIL CORPORATION
County WELD Address Box 9338
City FT. WORTH State TEXAS
Lease Name SCHWARTZ Well No. 1 Derrick Floor Elevation 4527
Location NW SW Section 4 Township 9N Range 56W Meridian C
(quarter quarter)
1980 feet from S Section line and 660 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 0; Gas 1Well 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 3/9/64Signed James W. VenterTitle Vice President

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

Commenced drilling 12-13, 19 63 Finished drilling 12-24, 19 63

CASING RECORD

| SIZE | WT. PER FT. | GRADE | DEPTH LANDED | NO. SKS. CMT. | W.O.C. | PRESSURE TEST | |
|-------|-------------|-------|--------------|---------------|--------|---------------|-----|
| | | | | | | Time | Psi |
| 8-5/8 | 24 | J-55 | 137 | 150 | 12 | 30 | 500 |
| | | | | | | | |
| | | | | | | | |

CASING PERFORATIONS

| Type of Charge | No. Perforations per ft. | From | Zone To |
|----------------|--------------------------|------|---------|
| JET | 4 | 5903 | 5911 |
| | | | |
| | | | |

TOTAL DEPTH 5931PLUG BACK DEPTH 5923Oil Productive Zone: From To Gas Productive Zone: From To Electric or other Logs run ES-INDUCTION, MICROLOG Date 12-24, 19 63Was 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 | | |
| 1-4-64 | 15% MUD ACID | 250 GAS | 5903 | 5911 | "J" SAND | DVR |
| 1-5-64 | SAND OIL | 10,000 GALS | 5903 | 5911 | "J" SAND | WRS |
| | | | | | | HMM |
| | | | | | | JAM |
| | | | | | | FIP |
| | | | | | | JJD |
| | | | | | | FILE |

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: Flowing Press. on Csg. lbs./sq.in.
Flowing Press. on Tbg. lbs./sq.in.
Size Tbg. in. No. feet run
Size Choke in.
Shut-in Pressure

For Pumping Well: Length of stroke used inches.
Number of strokes per minute
Diam. of working barrel inches
Size Tbg. in. No. feet run
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 0 API Gravity
Gas Vol. Mcf/Day; Gas-Oil Ratio Cf/Bbl. of oil
B.S. & W. 100 %; Gas Gravity (Corr. to 15.025 psi & 60°F)

WELL SWABBED 100% SALT WATER AFTER FRACTURE TREATMENT.

SEE
REVERSE
SIDE

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 |
|--------------------|------|--------|--|
| SURFACE CLAY & SDQ | 0 | 100 | |
| SH & SDY SH | 100 | 3050 | |
| BROKEN SAND | 3050 | 3210 | |
| SHALE | 3210 | 5000 | |
| BROKEN SD | 5005 | 5120 | |
| SHALE | 5120 | 5290 | |
| SDY SHALE | 5290 | 5340 | |
| SHALE | 5340 | 5902 | |
| SAND | 5902 | 5912 | |
| SDY SHALE | 5912 | 5925 | |
| SAND | 5925 | 5931 | |
| | | | DST #1: 5904-5911 TOOL OPEN 1 HOUR. GAS TO SURFACE 1 HOUR. TOO SMALL TO MEASURE. REC 10' F.O., 90' OIL CUT MUD, 90' WATER. FFP 127#, ISIBHP 1366, FSIBHP 1025. |