

Form approved.
Budget Bureau No. 42-R355.5

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

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 _____

2. NAME OF OPERATOR
Cotton Petroleum Corporation

3. ADDRESS OF OPERATOR
717-17th Street, Suite 2200, Denver, CO 80202

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

At surface 660' FEL & 1940' FSL

At top prod. interval reported below

At total depth

14. PERMIT NO.	DATE ISSUED
	3-10-80

15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (<i>Ready to prod.</i>)	18. ELEVATIONS (DF, REB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD
5-1-80	5-13-80	6-1-80	6753' GR	

20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRAILED BY	ROTARY TOOLS	CABLE TOOLS
7478'	7444'		→	0-TD	

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	25. WAS DIRECTIONAL SURVEY MADE
Gallup 6223'-6376'	No
Dakota 7119'-7312'	

26. TYPE ELECTRIC AND OTHER LOGS RUN	27. WAS WELL CORED
DIL. CNL/FDC/GR/Cal.	No

25. 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"	24#	371'	12 1/4"	250 sxs to surface	0
4 1/2"	10.5, 11.6#	7478'	7 7/8"	600 sxs Stage 1	0
				700 sxs Stage 2	0
				DV @ 4030'	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	6224	6157

31. PERFORATION RECORD (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
6223-25, 6267-80 1 JSPF, 6187, 89, 97, 6310, 24, 37, 39, 68, 72, 76, 7119-29 1 JSPF, 7143-52 1 JSPF, 7156-60 1 JSPF, 7264-70 2 JSPF, 7308-12 2 JSPF.	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	7264-7312	29,850 g gel wtr, 32,500 #20-
	7119-7160	84,200 g gel wtr, 135,000 #20
	6223-6376	64,158 g gel wtr, 150,000 #20

33.* PRODUCTION		
DATE FIRST PRODUCTION	PRODUCTION METHOD (<i>Flowing, gas lift, pumping—size and type of pump</i>)	WELL STATUS (<i>Producing or shut-in</i>)
6-3-80	Flowing	Producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6-12-90	6	1"	→	20	45	20 BLW	2250
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
50	0	→	80	180	80 BLW	46°	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	TEST WITNESSED BY
	H. Davis

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 D. L. Wood TITLE Division Production Manager DATE 6-13-80

*** (See Instructions and Spaces for Additional Data on Reverse Side)**

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

Item and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 33.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

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, BLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
Gallup	6223'	6376		Gallup	6223'	
Dakota	7119'	7312'		Dakota	7119'	