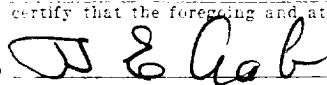


UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other In-
structions on
reverse side)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 Getty Oil Company							
3. ADDRESS OF OPERATOR Box 3360, Casper, Wyoming 82602							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1190' FSL & 2020' FWL At top prod. interval reported below same At total depth same							
14. PERMIT NO.		DATE ISSUED					
15. DATE STARTED		16. DATE T.D. REACHED		17. DATE COMPL. Ready to prod.		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	
9-30-79		10-9-79		11-2-79		5709' GR, 5719' KB	
20. TOTAL DEPTH, MD & TVD		21. PLUG BACK T.D., MD & TVD		22. IF MULTIPLE COMPL. HOW MANY*		23. INTERVALS DRILLED BY	
6500'		6456'		N/A		10-6500'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6278'-6418' - Dakota							25. WAS DIRECTIONAL SURVEY MADE No
26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Induction; Comp. form. Density.							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 FILLED	
8 5/8" OD	24	313'	12 1/4"	250 sks		none	
5 1/2"	14 & 15.5	6500'	7 7/8"	1370 sks		none	
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)			
30. TUBING RECORD							
SIZE	DEPTH SET (MD)	PACKER SET (MD)					
2 3/8"	6331'	-					
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
6278-84' - 6 shots				FIFTH INTERVAL (MD)			
6338-80' - 42 shots				6278-6418'			
6406-18' - 12 shots				AMOUNT AND KIND OF MATERIAL USED			
				120,000 gals, 1% KCL in			
				120,000 # 20/40 sand.			
33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
10-26-79		flowing				shut-in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PRODN. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
11-2-79	3	3/4"	→	1	355	0	1000:1
FLOW. TUBING FEES.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
201	773	→	4	4150	0	60	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY	
Shut in for pipeline connection						Mark Kramer	
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 		TITLE Area Superintendent				DATE 11-16-79	

*(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.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation 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:				38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CURED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CURSION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES					
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH
Dakota	6257'	6422'		Ojo Alamo	697'
				Kirkland	837'
				Fruitland	1667'
				Pictured Cliffs	1846'
				Lewis	1917'
				Chacra	2841'
				Mesa Verde	3432'
				Mancos	4405'
				Gallup	5392'
				Greenhorn	6156'
				Dakota	6257'