SIGNED

Ellison

SUBMIT IN DUPLICATE* UNITED STATES

(See other in-

Ferm approved. Budget Bureau No. 42-R355,5

DATE <u>8/17/79</u>

DEPARTMENT OF THE INTERIOR structions or reverse side; 5 CEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY NM - 74486. IF INDIAN, ALLOTTEE OR TRIBE NAME WELL COMPLETION OR RECOMPLETION REPORT AND LOG* 1a. TYPE OF WELL: 7. UNIT AGREEMENT NAME DRY X Other b. TYPE OF COMPLETION: NEW WORK OVER DEEP S. FARM OR LEASE NAME Other RESVR. 2. NAME OF OPERATOR Federal 15-21-2 Benson Mineral Group, Inc. 3. ADDRESS OF OPERATOR 10. FIELD AND POOL, OR WILDCAT 3700 Anaconda Tower, 555 17th St., Denver, CO 80202 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) Dakota Wildcat 11 SEC., T., R. M., OR BLOCK AND SUBVEY OR AREA At surface 1090' FSL & 1160' FEL At top prod. interval reported below At total depth Sec. 15-T21N-R2W 1 14. PERMIT NO. DATE ISSUED PARISH Sandova l 19. ELFV. CASINGHEAD 17. half comet. (Ready to gradit) 15. DATE SPUDDED 16. DATE T.D. REACHED 18. ELEVATIONS (DF. REB. RT. GR. ETC.)* 12 - 8 - 78P x A 7-27-79 7165' GR 22. IF MICITIE OMPL., HOW MANY 21. PLUG. BACK T.D., MD & TVD 23. INTERVALS DRILLED BY 20. TOTAL DEPTH, MD & TVD ROTARY TOOLS CABLE TOOLS 6369 Surf to 6377 24. PRODUCING INTERVAL(S), OF THIS COMPLETION- TOP, BOTTOM, NAME (MD AND TVD)* WAS DIRECTIONAL SURVEY MADE NO 26. TYPE ELECTRIC AND OTHER LOGS RUN 27. WAS WELL CORED CBL-VD-GR, CN, IL MO CASING RECORD (Report all strings set in well) CASING SIZE WEIGHT, LB./FT. DEPTH SET MOL CEMENTING RECORD HOLE SIZE AMOUNT PULLED 8 5/8" 32 310' 12 1/2" 275 sx class "B" 4 1/2" 11.6 6369' 7/8" 100 sx class "B" 29. LINER RECORD TUBING RECORD BOTTOM (MD) TOP (MD) SACKS CEMENT SCREEN (MD) SIZE DEPTH SET (MD) PACKER SET (MD) 3/8" 6203 31. PERFORATION RECORD (Interval, size and number) ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 6010-16; 6044-50; 6104-10; 6116-22 6010-6122 15,000 # 20-40 sand and 70 x 1 SPF. quality foam, 7,000 gal P& A PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping-size and type of pump) DATE FIRST PRODUCTION DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N FOR OIL-BBL. CAS AUG 2 3 1979 TEST PERIOD FLOW, TUBING PRESS. CASING PRESSURE CALCULATED OIL-BBL GAS-MCF AVITY-API (CORR.) 24-HOUR RATE DISTIN 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) 35. LIST OF ATTACHMENTS

TITLE Production Manager

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

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 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.), formatically available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formatically available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formatically available logs (drillers, geologists).

Hem 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 tion and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations.

for each additional interval to be separately produced, showing the additional data pertinent to such interval.

[tem 29: "Nacks Comend": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. Hems 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 tem 21 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,

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

-	Graneros Dakota	Picture Cliffs Greenhorn	FORMATION
	5999' 6183':	1600' 5911'	TOP
			BOTTOM
			FURNATION TOP BOTTOM BOTTOM BOTTOM BOTTOM BOTTOM DESCRIPTION, CONTENTS, ETC.
		MEAN, DEPTH TRUE VERT, OFFTH	38. GEOLOGIC MARKERS