

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

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 <u>0185</u>		
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☒	Other <u>Recompletion</u>
2. NAME OF OPERATOR						3. ADDRESS OF OPERATOR	
DEKALB Energy Company						1625 Broadway Denver, CO 80202	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*						APR 24 1991	
At surface 990' FNL & 990' FEL (NE/4 NE/4)						At top prod. interval reported below same	
At total depth same						14. PERMIT NO. N/A	
15. DATE SPUNDED 4-18-52						16. DATE T.D. REACHED 11-24-90	
17. DATE COMPL. (Ready to prod.)						18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6241' GR	
20. TOTAL DEPTH, MD & TVD 1874						21. PLUG, BACK T.D., MD & TVD 1815	
22. IF MULTIPLE COMPL., HOW MANY*						23. INTERVALS DRILLED BY	
24. PRODUCING INTERVAL(S). OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*						25. WAS DIRECTIONAL SURVEY MADE NO	
1744-1800' Fruitland Coal						26. TYPE ELECTRIC AND OTHER LOGS RUN CBL, CNL-GR, GST, NGT	
27. WAS WELL CORED NO						28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
4-1/2"		10.5#		1870'		200 SX	
10 3/4				94		60 SX	
7				1815		100 SX	
29. LINER RECORD				30. TUBING RECORD			
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
						SCREEN (MD)	
						2-3/8"	
						1784'	
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
1784-1800'				DEPTH INTERVAL (MD)			
1744-1756'				AMOUNT AND KIND OF MATERIAL USED			
				1784-1800' 200 gal 15% HCl, Frac w/40,000#			
				20/40 sd.			
				1744-1756' 200 gal 15% HCl.			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in) SI	
DATE OF TEST		HOURS TESTED 24		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
FLOW. TUBING PRESS. 236		CASING PRESSURE 236		CALCULATED 24-HOUR RATE		OIL—BBL. 264	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY	
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 <u>[Signature]</u>		TITLE District Superintendent				DATE <u>3-18-91</u>	

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

FARMINGTON RESOURCE AREA

RV

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 35.

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, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

38. GEOLOGIC MARKERS		
NAME	TOP	MEAS. DEPTH

TRUE VERT. DEPTH	