

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 *

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DEEP ☐ Other _____2. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. DEVR. ☐ Other _____

3. NAME OF OPERATOR

Ladd Petroleum Corporation

4. ADDRESS OF OPERATOR

830 Denver Club Bldg., Denver, CO 80202

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

At surface 890' FNL, 1730' FWL

At top prod. interval reported below same

At total depth

same

14. PERMIT NO.

DATE ISSUED

10/31/79

15. DATE SPEDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, REE, ET, GR, ETC.)* 19. ELEV. CASINGHEAD

1/24/80

2/2/80

3/11/80

5765 GL, 5777 KB

5765

20. TOTAL DEPTH, MD & TVD

21. PLUG, BACK T.D., MD & TVD

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

6550

6486

6486'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

6333 > Dakota
644925. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

GR-CCL-SNL-CDL-CBL

27. WAS WELL CORED

No

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	BOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24# K-55	390'	12 1/2	255 sx "B" + 2% CaCl	
4 1/2"	10.5# K-55	6550'	7-7/8	200 sx "B" + 8% gel + 160	SX
				50/50 Poz; 2nd stage 350 sx	
				65/35 + 320 sx 50/50	

LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORDED (Interval, size and number)

6333 > 23 holes, ±.40 diameter
6449

ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6333 - 6449	164,000# sand (20/40)
" "	75,000 gal gel wtr

PRODUCTION

33.* DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or shut-in)	
SI		flowing		Waiting on pipeline	
DATE OF TEST	HOURS TESTED	CHOKED SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—BBL.
3/10/80	3			198	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—BBL.	WATER—BBL.
.19	960			1580	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					
vented					
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

Michael J. Wondray

TITLE

Production Engineer

DATE 3/12/80

* (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, on 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 (driller, geologist, 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 General": 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.)

31. SUMMARY OF POIUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CONDU INTERVALS, AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION DEEP, TIME TOOL, OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
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32. GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TRUE DEPTH
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Dakota 6329
 Pictured Cliffs 1750
 Lewis Shale 1920
 Cliff House 3390
 Menefee 3959
 Pt. Lookout 4165