

MAY 6 1958



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OIL AND GAS CONSERVATION COMMISSION
OF THE STATE OF COLORADOOIL & GAS
CONSERVATION COMMISSION

WELL COMPLETION REPORT

INSTRUCTIONS

Within thirty (30) days after the completion of any well, the owner or operator shall transmit to the Director three (3) copies of this form, for wells drilled on Patented or Federal lands and four (4) copies for wells drilled on State lands. Upon request, geological information will be kept confidential for six months after the filing thereof.

Field Wildcat Operator Dawson Oil Corporation
County Washington Address 845 Petroleum Club Bldg.
City Denver State Colorado
Lease Name 365 Downing Well No. 1 Derrick Floor Elevation 1724
Location C SW SE Section 5 Township 3S Range 56W Meridian 6th P.M.
698 (quarter quarter) feet from S Section line and 1986 feet from E Section Line
N or S E or W

Drilled on: Private Land ☒ Federal Land ☐ State Land ☐

Number of producing wells on this lease including this well: Oil _____; Gas _____

Well completed as: Dry Hole ☒ Oil Well ☐ Gas Well ☐

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Date May 5, 1958

Signed W C Burns
Title Secretary-Treasurer

The summary on this page is for the condition of the well as above date.

Commenced drilling April 2, 19 58 Finished drilling April 7, 19 58

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
8-5/8"	24#	J-55	103'	100			

CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	Zone	
		From	To

TOTAL DEPTH 5261'

PLUG BACK DEPTH _____

Oil Productive Zone: From _____ To _____ Gas Productive Zone: From _____ To _____
Electric or other Logs run Induction-Electrical Log and Microlog Date April 7, 19 58
Was well cored? no Has well sign been properly posted? _____

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL, EXPLOSIVE OR CHEMICAL USED	QUANTITY	ZONE		FORMATION	REMARKS
			From	To		

Results of shooting and/or chemical treatment: _____

DATA ON TEST

Test Commenced _____ A.M. or P.M. _____ 19 _____ Test Completed _____ A.M. or P.M. _____ 19 _____

For Flowing Well:

Flowing Press. on Csg. _____ lbs./sq.in.

Flowing Press. on Tbg. _____ lbs./sq.in.

Size Tbg. _____ in. No. feet run _____

Size Choke _____ in.

Shut-in Pressure _____

For Pumping Well:

Length of stroke used _____ inches.

Number of strokes per minute _____

Diam. of working barrel _____ inches

Size Tbg. _____ in. No. feet run _____

Depth of Pump _____ feet.

If flowing well, did this well flow for the entire duration of this test without the use of swab or other artificial flow device? _____

TEST RESULTS: Bbls. oil per day _____ API Gravity _____
Gas Vol. _____ Mcf/Day; Gas-Oil Ratio _____ Cf/Bbl. of oil
B.S. & W. _____ %; Gas Gravity _____ (Corr. to 15.025 psi & 60°F)

FORMATION RECORD

Give name, top, bottom and description of all formations encountered, and indicate oil, gas and water bearing intervals, cored sections and drill stem tests.

INSTRUCTIONS

FORMATION NAME	TOP	BOTTOM	DESCRIPTION AND REMARKS
Niobrara	4186		
Ft. Hays	4632		
Carlile	4666		
Bentonite	4971		
"D" Sand	5063		
"J" Sand	5115		
Schl. T.D.	5261		
Drls. T.D.	5259		
Casing Record			
Casing Perforations			
Record of Shooting and on Chemical Treatment			

DATA ON TEST

TEST NO.		DATE	
TEST DEPTH		TEST TIME	
TEST RESULTS		TEST COMMENTS	
TEST OBSERVATIONS		TEST CONCLUSIONS	
TEST SIGNATURE		TEST DATE	