

**FORM
5**Rev
02/08State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400094031

DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type ☒ Final completion ☐ Preliminary completion

1. OGCC Operator Number: 10000 4. Contact Name: Kristina Lee
2. Name of Operator: BP AMERICA PRODUCTION COMPANY Phone: (303) 659-9581
3. Address: 501 WESTLAKE PARK BLVD Fax: (303) 659-8209
City: HOUSTON State: TX Zip: 77079

5. API Number 05-067-09699-00 6. County: LA PLATA
7. Well Name: SNOOK GU C Well Number: 3
8. Location: QtrQtr: NENE Section: 7 Township: 32N Range: 7W Meridian: N
Footage at surface: Direction: FNL Distance: 1177 Direction: FEL Distance: 355
As Drilled Latitude: 37.035760 As Drilled Longitude: -107.642754

GPS Data:

Data of Measurement: 10/09/2009 PDOP Reading: 2.3 GPS Instrument Operator's Name: Bob Cress

** If directional footage

at Top of Prod. Zone Distance: 1997 Direction: FNL Distance: 1792 Direction: FEL
Sec: 7 Twp: 32N Rng: 7W
at Bottom Hole Distance: 2031 Direction: FNL Distance: 1756 Direction: FEL
Sec: 7 Twp: 32n Rng: 7W

9. Field Name: IGNACIO BLANCO 10. Field Number: 38300
11. Federal, Indian or State Lease Number: Fee/COC-539

12. Spud Date: (when the 1st bit hit the dirt) 05/20/2009 13. Date TD: 05/26/2009 14. Date Casing Set or D&A: 05/27/2009

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 3932 TVD 3419 17 Plug Back Total Depth MD 3878 TVD 345918. Elevations GR 6414 KB 6430

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

CBL/CCL/GR/RST

20. Casing, Liner and Cement:

CASING

| Casing Type | Size of Hole | Size of Casing | Weight Per Foot | Setting Depth | Sacks Cement | Cement Bottom | Cement Top |
|-------------|--------------|----------------|-----------------|---------------|--------------|---------------|------------|
| CONDUCTOR | | | | | | | |
| SURF | 12+1/4 | 8+5/8 | 15.5 | 438 | 340 | 438 | 0 |
| 1ST | 7+7/8 | 5+1/2 | 13.5 | 3,922 | 400 | 3,922 | 0 |

ADDITIONAL CEMENT

Cement work date: _____

Details of work: _____

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

| FORMATION NAME | Measured Depth | | Check if applies | | COMMENTS (All DST and Core Analyses must be submitted to COGCC) |
|----------------|----------------|--------|--------------------------|--------------------------|---|
| | Top | Bottom | DST | Cored | |
| FRUITLAND COAL | 3,358 | 3,726 | <input type="checkbox"/> | <input type="checkbox"/> | |

Comment:

Cement reports, logs and directional survey was submitted with preliminary form 5. COC-53983

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Kristina Lee

Title: Regulatory Consultant -BP Date: _____ Email: leeka@bp.com

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____