

FORM  
5

Rev  
02/08

State 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:

400085440

**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: 10276 4. Contact Name: Moe Felman  
 2. Name of Operator: PINE RIDGE OIL & GAS LLC Phone: (303) 226-1300  
 3. Address: 600 17TH ST STE 800S Fax: (303) 226-1301  
 City: DENVER State: CO Zip: 80202

5. API Number 05-043-06182-00 6. County: FREMONT  
 7. Well Name: PATTI Well Number: 32-29  
 8. Location: QtrQtr: SWNE Section: 29 Township: 19S Range: 69W Meridian: 6  
 Footage at surface: Direction: FNL Distance: 1958 Direction: FEL Distance: 2291  
 As Drilled Latitude: 38.368674 As Drilled Longitude: -105.133713

GPS Data:

Data of Measurement: 08/10/2010 PDOP Reading: 2.0 GPS Instrument Operator's Name: Chris Pearson

\*\* If directional footage

at Top of Prod. Zone Distance: 2226 Direction: FNL Distance: 1926 Direction: FEL  
 Sec: 29 Twp: 19S Rng: 69W  
 at Bottom Hole Distance: 2473 Direction: FSL Distance: 1144 Direction: FEL  
 Sec: 29 Twp: 19S Rng: 69W

9. Field Name: FLORENCE-CANON CITY 10. Field Number: 24600  
 11. Federal, Indian or State Lease Number: N/A

12. Spud Date: (when the 1st bit hit the dirt) 06/14/2010 13. Date TD: 06/23/2010 14. Date Casing Set or D&A: 06/24/2010

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 4514 TVD 4110 17 Plug Back Total Depth MD 4514 TVD 4110

18. Elevations GR 5285 KB 5296

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:

Gamma Ray  
Array Induction  
Caliper  
Temperature

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	24	16		65	39	65	0
SURF	12+1/4	9+5/8	32.3	720	331	720	0
1ST	8+3/4	7	23	3,870	75	3,870	3,400

### 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	
PIERRE	0	3,944	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	3,944	4,514	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Core: 4324-4339' MD

Comment:

A 6 1/4" hole was drilled to TD. Production casing was not ran in the hole.

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

Signed: \_\_\_\_\_

Print Name: Moe Felman

Title: Drilling Manager

Date: \_\_\_\_\_

Email: moe.felman@cometridgeresources.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: \_\_\_\_\_

### Attachment Check List

Att Doc Num	Name	Doc Description
400091707	LAS-TEMPERATURE	05043061820000_LAS_for_State_2.LAS
400106047	LAS-INDUCTION	05043061820000_LAS_for_State_Triple Combo.LAS
400106050	DIRECTIONAL SURVEY	Patti 32-29_Directional Surveys.pdf
400106051	CMT SUMMARY	Patti 32-29_Surface Cement Report_06-10.pdf
400106052	CMT SUMMARY	Patti 32-29_Intermediate Cement Report_06-10.pdf

Total Attach: 5 Files