

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

DRILLING COMPLETION REPORT

Document Number:
400107868

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: 19170 4. Contact Name: CLAYTON DOKE
2. Name of Operator: CONQUEST OIL COMPANY Phone: (970) 669-7411
3. Address: 8207 W 20TH STREET - SUITE B Fax: (970) 669-4077
City: GREELEY State: CO Zip: 80634

5. API Number 05-123-32207-00 6. County: WELD
7. Well Name: SWD Well Number: C7A
8. Location: QtrQtr: SESE Section: 34 Township: 7N Range: 63W Meridian: 6
Footage at surface: Distance: 427 feet Direction: FSL Distance: 1034 feet Direction: FEL
As Drilled Latitude: 40.524140 As Drilled Longitude: -104.416720

GPS Data:

Data of Measurement: 11/17/2010 PDOP Reading: 1.2 GPS Instrument Operator's Name: Tim Wheelock

** If directional footage

at Top of Prod. Zone Distance: _____ feet Direction: _____ Distance: _____ feet Direction: _____
Sec: _____ Twp: _____ Rng: _____
at Bottom Hole Distance: _____ feet Direction: _____ Distance: _____ feet Direction: _____
Sec: _____ Twp: _____ Rng: _____

9. Field Name: WATTENBERG 10. Field Number: 90750

11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 09/23/2010 13. Date TD: 10/09/2010 14. Date Casing Set or D&A: 10/10/2010

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 9799 TVD _____ 17 Plug Back Total Depth MD 9797 TVD _____

18. Elevations GR 4713 KB 4728

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:

GR, SP, FDC, CNL, CBL

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Top	Cement Bot	Status
SURF	12+1/4	9+5/8	36	595	235	48	595	CALC
1ST	8+3/4	7	23 & 26	8,505	245	7,150	8,505	CBL
1ST LINER	6+1/8	4+1/2	11.6	9,799				

ADDITIONAL CEMENT

Cement work date: 10/03/2010

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	6,645	955	1,900	6,645
1 INCH	SURF		25	0	48

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	
CODELL	6,732		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,202		<input type="checkbox"/>	<input type="checkbox"/>	
LYONS	8,508		<input type="checkbox"/>	<input type="checkbox"/>	
LOWER SATANKA	8,645		<input type="checkbox"/>	<input type="checkbox"/>	
WOLFCAMP	8,862		<input type="checkbox"/>	<input type="checkbox"/>	
AMAZON	8,946		<input type="checkbox"/>	<input type="checkbox"/>	
COUNCIL GROVE	8,990		<input type="checkbox"/>	<input type="checkbox"/>	
Admire	9,174		<input type="checkbox"/>	<input type="checkbox"/>	
VIRGIL	9,220		<input type="checkbox"/>	<input type="checkbox"/>	
MISSOURI	9,470		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Fields marked with tops as 0' in the casing and cementing sections indicate ground level. All other measurements are from KB. form 5a is forthcoming. Paper copies of well logs have been mailed.

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

Signed: _____

Print Name: CLAYTON DOKE

Title: ENGINEER

Date: _____

Email: cdoke@petersonenergy.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
400107897	LAS-COMBINATION OPEN HOLE
400108186	CEMENT JOB SUMMARY
400108187	CEMENT JOB SUMMARY
400111997	LAS-COMBINATION OPEN HOLE
400112150	PDS-CEMENT BOND

Total Attach: 5 Files

General Comments

User Group

Comment

Comment Date

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)