

**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:

2537207

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: 100264 4. Contact Name: WANETT MCCAULEY
2. Name of Operator: XTO ENERGY INC Phone: (505) 333-3630
3. Address: 382 CR 3100 Fax: (505) 333-3284
City: AZTEC State: NM Zip: 87410

5. API Number 05-103-10782-00 6. County: RIO BLANCO
7. Well Name: FEDERAL Well Number: 4S-95-1-21DP
8. Location: QtrQtr: NWNE Section: 1 Township: 4S Range: 95W Meridian: 6
Footage at surface: Distance: 1046 feet Direction: FNL Distance: 2626 feet Direction: FEL
As Drilled Latitude: 39.734933 As Drilled Longitude: -108.004372

GPS Data:

Data of Measurement: 04/24/2007 PDOP Reading: 2.4 GPS Instrument Operator's Name: MCCOY ANDERSON

** 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: PICEANCE CREEK 10. Field Number: 68800
11. Federal, Indian or State Lease Number: COC-6148

12. Spud Date: (when the 1st bit hit the dirt) 09/17/2006 13. Date TD: 03/13/2007 14. Date Casing Set or D&A: 03/18/2007

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 15440 TVD _____ 17 Plug Back Total Depth MD 15345 TVD _____18. Elevations GR 6965 KB 6996

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,GR,CDN,RST

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	28	24		0	116	148		116	CALC
SURF	19	13+3/8		0	3,038	3,203		3,038	CBL
1ST	12+1/4	9+5/8		0	10,225	1,837		10,225	CALC
2ND	8+1/2	5+1/2		0	15,440	937		15,440	CBL

ADDITIONAL CEMENT

Cement work date: _____

Details of work: _____

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

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	
OHIO CREEK	8,984		<input type="checkbox"/>	<input type="checkbox"/>	
WILLIAMS FORK	9,137		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	13,698		<input type="checkbox"/>	<input type="checkbox"/>	
COZZETTE	13,972		<input type="checkbox"/>	<input type="checkbox"/>	
CORCORAN	14,733		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

REVISED FORMATION TOP SUBMISSION

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

Signed: _____

Print Name: WANETT MCCAULEY

Title: REGULATORY COMPLIANCE TEC Date: 11/16/2010 Email: wanett_mccauley@xtoenergy.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: 1/19/2011

Attachment Check List

Att Doc Num	Name
2537207	FORM 5 SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)