

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:

2609942

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: 10232 4. Contact Name: ERIC JACOBSON
2. Name of Operator: LARAMIE ENERGY II, LLC Phone: (303) 339-4400
3. Address: 1512 LARIMER ST STE 1000 Fax: (303) 339-4399
City: DENVER State: CO Zip: 80202

5. API Number 05-045-18531-00 6. County: GARFIELD
7. Well Name: REPP0 Well Number: 34-14D
8. Location: QtrQtr: SWSE Section: 34 Township: 7S Range: 96W Meridian: 6
Footage at surface: Distance: 530 feet Direction: FSL Distance: 2596 feet Direction: FEL
As Drilled Latitude: _____ As Drilled Longitude: _____

GPS Data:
Data of Measurement: _____ PDOP Reading: _____ GPS Instrument Operator's Name: _____

** If directional footage
at Top of Prod. Zone Distance: 338 feet Direction: FSL Distance: 2168 feet Direction: FWL
Sec: 34 Twp: 7S Rng: 96W
at Bottom Hole Distance: 319 feet Direction: FSL Distance: 2165 feet Direction: FWL
Sec: 34 Twp: 7S Rng: 96W

9. Field Name: GRAND VALLEY 10. Field Number: 31290
11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 09/22/2009 13. Date TD: 09/27/2009 14. Date Casing Set or D&A: 09/28/2009

15. Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 5045 TVD 4990 17 Plug Back Total Depth MD 4995 TVD 4940

18. Elevations GR 5155 KB 5176 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:
SD, DSN, ACTR, MUD

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	26	16		0	80		0	80	CALC
SURF	12+1/4	8+5/8		0	845	330	0	845	CALC
1ST	7+7/8	4+1/2		0	5,040	600	1,250	5,040	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	
WILLIAMS FORK	2,198		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	4,884		<input type="checkbox"/>	<input type="checkbox"/>	

Comment: _____

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

Signed: Y _____ Print Name: ERIC JACOBSON

Title: SENIOR OPS ENGINEER Date: 12/4/2009 Email: EJACOBSON@LARAMIE-ENERGY

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: *David S. Neshin* Director of COGCC Date: 2/7/2011

Attachment Check List

Att Doc Num	Name
2557270	DIRECTIONAL SURVEY

Total Attach: 1 Files

General Comments

User Group **Comment** **Comment Date**

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

Total: 0 comment(s)