

**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



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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.

Document Number:

2517177

Completion Type ☒ Final completion ☐ Preliminary completion

1. OGCC Operator Number: 96850

4. Contact Name: SANDRA SALAZAR

2. Name of Operator:

Phone: (303) 6298456

3. Address:

Fax: (303) 6298268

City: State: CO Zip: 80202

5. API Number 05-045-16328-00

6. County: GARFIELD

7. Well Name: FEDERAL

Well Number: RWF 544-4

8. Location: QtrQtr: SWSE Section: 4 Township: 7S Range: 94W Meridian: 6

Footage at surface: Distance: 655 feet Direction: FSL Distance: 2022 feet Direction: FEL

As Drilled Latitude: 39.461789 As Drilled Longitude: -107.890237

GPS Data:

Data of Measurement: 04/08/2009 PDOP Reading: 1.8 GPS Instrument Operator's Name: JACK KIRKPARTICK

** If directional footage

at Top of Prod. Zone Distance: 221 feet Direction: FSL Distance: 587 feet Direction: FEL

Sec: 4 Twp: 7S Rng: 94W

at Bottom Hole Distance: 226 feet Direction: FSL Distance: 589 feet Direction: FEL

Sec: 4 Twp: 7S Rng: 94W

9. Field Name: RULISON

10. Field Number: 75400

11. Federal, Indian or State Lease Number: C46030

12. Spud Date: (when the 1st bit hit the dirt) 07/13/2009 13. Date TD: 07/21/2009 14. Date Casing Set or D&A: 07/23/2009

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 8630 TVD 8416 17 Plug Back Total Depth MD 8586 TVD 8372

18. Elevations GR 6276 KB 6300

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
RPM
Mud
Ind-dens-neu
Radial analysis bond log

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	24	18		0	60	22	0	60	VISU
SURF	13+1/2	9+5/8		0	1,135	320	0	1,135	VISU
1ST	7+7/8	4+1/2		0	8,617	890	3,424	8,617	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	
J SAND	2,528		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	5,008		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	7,617		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	8,512		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

SURFACE PRESSURE =0#

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

Signed: _____ Print Name: SANDRA SALAZAR

Title: PERMIT TECHNICIAN Date: 8/31/2010 Email: SANDRA.SALAZAR@WILLIAMS.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: David S. Nash Director of COGCC Date: 2/10/2011

Attachment Check List

Att Doc Num	Name
2517177	FORM 5 SUBMITTED
2517179	DIRECTIONAL SURVEY
2517180	CEMENT JOB SUMMARY

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date
Permit	Corrected latitude to match scout card Corrected GR and KB to match log header Added logs to log list from scout card	2/7/2011 10:38:06 AM

Total: 1 comment(s)