

**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:

2610582

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: 69805 4. Contact Name: MICHAEL CLARK
2. Name of Operator: PETROX RESOURCES INC Phone: (970) 878-5594
3. Address: P O BOX 2600 Fax: (970) 878-5594
City: MEEKER State: CO Zip: 81641

5. API Number 05-007-06278-00 6. County: ARCHULETA
7. Well Name: CANDELARIA 33-5 Well Number: 10-1
8. Location: QtrQtr: NENW Section: 10 Township: 33N Range: 5W Meridian: N
Footage at surface: Distance: 235 feet Direction: FNL Distance: 2470 feet Direction: FWL
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: 331 feet Direction: FNL Distance: 2461 feet Direction: FWL
Sec: 10 Twp: 33N Rng: 5W
at Bottom Hole Distance: 2595 feet Direction: FNL Distance: 2318 feet Direction: FEL
Sec: 10 Twp: 33N Rng: 5W

9. Field Name: IGNACIO BLANCO 10. Field Number: 38300

11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 07/01/2009 13. Date TD: 07/12/2009 14. Date Casing Set or D&A: 07/13/2009

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 4753 TVD 2803 17 Plug Back Total Depth MD 4753 TVD 280318. Elevations GR 6283 KB 6296

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/VDL/CCL/GR

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	13+1/4	9+5/8		0	382	325	0	382	
SURF	8+3/4	7		0	2,951	270	200	2,951	CBL
1ST LINER	6+1/4	4+1/2		2851	4,753				

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	
FRUITLAND COAL	2,284	2,308	<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: MICHAEL CLARK

Title: PRESIDENT Date: 2/1/2010 Email: MIKE.PETROXCBM@GMAIL.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. Neslin* Director of COGCC Date: 2/10/2011

Attachment Check List

Att Doc Num	Name
2070630	DIRECTIONAL SURVEY

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)