



Document Number:

2554475

# 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: 96850

4. Contact Name: ANGELA NEIFERT

2. Name of Operator: WILLIAMS PRODUCTION RMT COMPANY LLC

Phone: (303) 6064398

3. Address: 1515 ARAPAHOE ST STE 1000

Fax: (303) 6298285

City: DENVER State: CO Zip: 80202

5. API Number 05-045-18304-00

6. County: GARFIELD

7. Well Name: SPECIALTY RESTAURANTS

Well Number: SG 412-33

8. Location: QtrQtr: SWNW Section: 33 Township: 7S Range: 96W Meridian: 6

Footage at surface: Distance: 1591 feet Direction: FNL Distance: 939 feet Direction: FWL

As Drilled Latitude: 39.396359 As Drilled Longitude: -108.120464

GPS Data:

Data of Measurement: 10/20/2009      PDOP Reading: 3.9      GPS Instrument Operator's Name: WAYNE KIRKPATRICK

\*\* If directional footage

at Top of Prod. Zone    Distance:            feet    Direction:    FNL            Distance:            feet    Direction:    FWL

Sec: 33                      Twp: 17S                      Rng: 96W

at Bottom Hole Distance: 2187 feet Direction: FNL Distance: 696 feet Direction: FWL

Sec: 33                      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) 04/07/2010 13. Date TD: 04/12/2010 14. Date Casing Set or D&A: 04/14/2010

### 15. Well Classification:

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

16. Total Depth	MD	4975	TVD	4896	17 Plug Back Total Depth	MD	TVD
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18. Elevations GR 5058 KB 5085

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; HIGH RES INDUCTION, SPECTRAL DENSITY, DUAL SPACED NEUTRON

## 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	40	25	0	40	VISU
SURF	13+1/2	9+5/8		0	944	255	0	944	VISU
1ST	7+7/8	4+1/2		0	4,943	915	1,070	4,943	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	
WASATCH G	524		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	2,044		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	4,391		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	4,862		<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: \_\_\_\_\_ Print Name: ANGELA NEIFERT

Title: PERMIT TECH Date: 5/5/2010 Email: ANGELA.NEIFERT@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: 2/17/2011

### Attachment Check List

Att Doc Num	Name
2554475	FORM 5 SUBMITTED
2554476	DIRECTIONAL SURVEY
2554477	WELLBORE DIAGRAM
2554478	CEMENT JOB SUMMARY

Total Attach: 4 Files

### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)