

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:

2556207

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: 55575 4. Contact Name: DEB POWELL
2. Name of Operator: MCELVAIN OIL & GAS PROPERTIES Phone: (303) 893-0933
3. Address: 1050 17TH ST STE 2500 Fax: (303) 893-0914
City: DENVER State: CO Zip: 80265-20

5. API Number 05-067-09651-00 6. County: LA PLATA
7. Well Name: PAYNE Well Number: 22
8. Location: QtrQtr: SWSE Section: 17 Township: 32N Range: 6W Meridian: N
Footage at surface: Distance: 1191 feet Direction: FSL Distance: 2015 feet Direction: FEL
As Drilled Latitude: 37.013160 As Drilled Longitude: -107.521700

GPS Data:

Data of Measurement: 01/14/2009 PDOP Reading: 1.9 GPS Instrument Operator's Name: SCOTT WIEBE

** If directional footage

at Top of Prod. Zone Distance: 1599 feet Direction: FNL Distance: 836 feet Direction: FEL
Sec: 17 Twp: 32N Rng: 6W
at Bottom Hole Distance: 1658 feet Direction: FNL Distance: 648 feet Direction: FEL
Sec: 17 Twp: 32N Rng: 6W

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) 12/20/2009 13. Date TD: 01/01/2009 14. Date Casing Set or D&A: 01/02/2009

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 3465 TVD 3515 17 Plug Back Total Depth MD 3415 TVD 3018

18. Elevations GR 6380 KB 6393

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:

AIT-CN/D /CBL

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
SURF	12+1/4	8+5/8		0	590	400		590	CALC
1ST	7+7/8	5+1/2		0	3,462	400	1,100	3,438	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	
OJO ALAMO	2,069	2,213	<input type="checkbox"/>	<input type="checkbox"/>	
KIRTLAND	2,214	3,064	<input type="checkbox"/>	<input type="checkbox"/>	
FRUITLAND	3,065	3,259	<input type="checkbox"/>	<input type="checkbox"/>	
PICTURED CLIFFS	3,260	3,465	<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: DEBORAH K POWELL

Title: ENG TECH SUPERVISOR Date: 6/24/2010 Email: DEBBP@MCELVAIN.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: 2/23/2011

Attachment Check List

Att Doc Num	Name
2556207	FORM 5 SUBMITTED
2556208	OPERATIONS SUMMARY

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	req digital CBL, D/S AND CMT TKT SUBMITTED WITH PRELIM 5. req pbtvd and pbtvd	2/14/2011 12:16:16 PM

Total: 1 comment(s)