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|---|--|--|---|----|----|----|----|
| 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 |  | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table> Document Number: 2512640 | DE | ET | OE | ES |
| DE | ET | OE | ES | | | | |
| 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 <input checked="" type="checkbox"/> Final completion <input type="checkbox"/> Preliminary completion | | | | | | | |
| 1. OGCC Operator Number: 18600 | | 4. Contact Name: ANTHONY TRINKO | | | | | |
| 2. Name of Operator: COLORADO INTERSTATE GAS COMPANY | | Phone: (719) 520-4557 | | | | | |
| 3. Address: P O BOX 1087 | | Fax: (719) 667-7739 | | | | | |
| City: COLORADO SPRIN State: CO Zip: 80944 | | | | | | | |
| 5. API Number 05-001-09728-00 | | 6. County: ADAMS | | | | | |
| 7. Well Name: TOTEM | | Well Number: 7 | | | | | |
| 8. Location: QtrQtr: NESE Section: 8 Township: 2S Range: 62W Meridian: 6 | | | | | | | |
| Footage at surface: Distance: 1810 feet Direction: FSL | | Distance: 1190 feet Direction: FEL | | | | | |
| As Drilled Latitude: 39.888400 | | As Drilled Longitude: -104.342580 | | | | | |
| GPS Data: | | | | | | | |
| Data of Measurement: 07/16/2010 PDOP Reading: 1.9 GPS Instrument Operator's Name: RICHARD B GABRIEL | | | | | | | |
| ** If directional footage at Top of Prod. Zone | | Dist.: 1358 feet. Direction: FSL Dist.: 1509 feet. Direction: FEL | | | | | |
| Sec: 8 Twp: 2S Rng: 62W | | | | | | | |
| ** If directional footage at Bottom Hole | | Dist.: 439 feet. Direction: FNL Dist.: 2506 feet. Direction: FEL | | | | | |
| Sec: 17 Twp: 2S Rng: 62W | | | | | | | |
| 9. Field Name: TOTEM | | 10. Field Number: 83000 | | | | | |
| 11. Federal, Indian or State Lease Number: 5160/73 | | | | | | | |
| 12. Spud Date: (when the 1st bit hit the dirt) 07/18/2010 13. Date TD: 08/03/2010 14. Date Casing Set or D&A: 07/29/2010 | | | | | | | |
| 15. Well Classification: | | | | | | | |
| <input type="checkbox"/> Dry <input type="checkbox"/> Oil <input type="checkbox"/> Gas/Coalbed <input type="checkbox"/> Disposal <input type="checkbox"/> Stratigraphic <input type="checkbox"/> Enhanced Recovery <input checked="" type="checkbox"/> Storage <input type="checkbox"/> Observation | | | | | | | |
| 16. Total Depth MD 9640 TVD** 7274 | | 17 Plug Back Total Depth MD 9640 TVD** 7274 | | | | | |
| 18. Elevations GR 5182 KB 5197 | | 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: | | | | | | | |
| ISOLATION SCANNER-CEMENT BOND LOG | | | | | | | |

20. Casing, Liner and Cement:

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

CASING

| Casing Type | Size of Hole | Size of Casing | Wt/Ft | Csg/Liner Top | Setting Depth | Sacks Cmt | Cmt Top | Cmt Bot | Status |
|-------------|--------------|----------------|-------|---------------|---------------|-----------|---------|---------|--------|
| SURF | 14+3/4 | 10+3/4 | | 0 | 1,138 | 626 | | 1,138 | CALC |
| 1ST | 9+7/8 | 7 | | 0 | 7,657 | 1,675 | 924 | 7,657 | 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 | |
| D SAND | 7,358 | 7,409 | <input type="checkbox"/> | <input type="checkbox"/> | |
| J SAND | 7,584 | | <input type="checkbox"/> | <input type="checkbox"/> | |

Comment:

PRODUCTION CASING CEMENT PROGRAM: STAGE 1: 195SXECNCEM+355SXFRACTEM STAGE 2: 915SXECNOCEM+160SXFRACTEM+50SXHALLIBURTON PREMIUM CLASS G. DV TOOL@ 5,071' KB

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

Signed: _____ Print Name: ANTONY P TRINKO

Title: SR GEOLOGIST

Date: 9/2/2010

Email: ANTHONY.TRINKO@ELPASO.COM

Attachment Check List

| Att Doc Num | Document Name | attached ? | | | |
|-----------------------------|-----------------------|------------|-------------------------------------|----|-------------------------------------|
| <u>Attachment Checklist</u> | | | | | |
| 2512642 | CMT Summary * | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| | Core Analysis | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> |
| 2512641 | Directional Survey ** | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| | DST Analysis | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> |
| | Logs | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> |
| | Other | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> |
| <u>Other Attachments</u> | | | | | |
| 2512640 | FORM 5 SUBMITTED | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |

General Comments

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

Total: 0 comment(s)