IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

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

Document Number: 1667403

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: 69175
4. Contact Name: LARRY ROBBINS
2. Name of Operator: PETROLEUM DEVELOPMENT CORPORATION
Phone: (303) 860-5822
3. Address: 1775 SHERMAN STREET - STE
Fax: (303) 860-5838
City: DENVER State: CO Zip: 80203

5. API Number 05-123-11508-00
6. County: WELD
7. Well Name: FIELDS-NELSON
Well Number: 34-1
8. Location: QtrQtr: SWNW Section: 34 Township: 5N Range: 67W Meridian: 6
Footage at surface: Distance: 1980 feet Direction: FNL Distance: 660 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 Dist.: feet. Direction: Dist.: feet. Direction:
Sec: Twp: Rng:
** If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:
Sec: Twp: Rng:

9. Field Name: JOHNSTOWN
10. Field Number: 42600
11. Federal, Indian or State Lease Number: 65458

12. Spud Date: (when the 1st bit hit the dirt) 11/30/1983
13. Date TD: 12/07/1983
14. Date Casing Set or D&A:

15. Well Classification:
☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 7042 TVD**
17 Plug Back Total Depth MD 7037 TVD**

18. Elevations GR 4802 KB 4812

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

20. Casing, Liner and Cement:

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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+1/2	8+5/8		0	347	230	0	347	
1ST	7+7/8	4+1/2		0	7,036	250	4,200	7,036	CBL
2ND	7+7/8	4+1/2		0	7,036	250	6,238	7,036	CBL

ADDITIONAL CEMENT

Cement work date:

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
SQUEEZE	SURF		720	0	6,221

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	
SHANNON	4,396		☐	☐	
NIOBRARA	6,662		☐	☐	
FORT HAYS	6,962		☐	☐	
CODELL	6,987		☐	☐	

Comment:

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

Signed: _____ Print Name: LARRY ROBBINS

Title: REGULATORY AGENT Date: _____ Email: IROBBINS@PETD.COM

Attachment Check List

Att Doc Num	Document Name	attached ?
Attachment Checklist		
	CMT Summary *	Yes ☐ No ☒
	Core Analysis	Yes ☐ No ☒
	Directional Survey **	Yes ☐ No ☒
	DST Analysis	Yes ☐ No ☒
	Logs	Yes ☐ No ☒
	Other	Yes ☐ No ☒
Other Attachments		
1667403	FORM 5 SUBMITTED	Yes ☒ No ☐

General Comments

User Group	Comment	Comment Date
Permit	WAITING FOR HARD COPY CBL	9/21/2010 12:37:35 PM

Total: 1 comment(s)