

**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:

400085440

**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: 10276 4. Contact Name: Moe Felman  
2. Name of Operator: PINE RIDGE OIL & GAS LLC Phone: (303) 226-1300  
3. Address: 600 17TH ST STE 800S Fax: (303) 226-1301  
City: DENVER State: CO Zip: 80202

5. API Number 05-043-06182-00 6. County: FREMONT  
7. Well Name: PATTI Well Number: 32-29  
8. Location: QtrQtr: SWNE Section: 29 Township: 19S Range: 69W Meridian: 6  
Footage at surface: Distance: 1958 feet Direction: FNL Distance: 2291 feet Direction: FEL  
As Drilled Latitude: 38.368674 As Drilled Longitude: -105.133713

## GPS Data:

Data of Measurement: 08/10/2010 PDOP Reading: 2.0 GPS Instrument Operator's Name: Chris Pearson\*\* If directional footage at Top of Prod. Zone Dist.: 2226 feet. Direction: FNL Dist.: 1926 feet. Direction: FELSec: 29 Twp: 19S Rng: 69W\*\* If directional footage at Bottom Hole Dist.: 2473 feet. Direction: FSL Dist.: 1144 feet. Direction: FELSec: 29 Twp: 19S Rng: 69W9. Field Name: FLORENCE-CANON CITY 10. Field Number: 2460011. Federal, Indian or State Lease Number: N/A12. Spud Date: (when the 1st bit hit the dirt) 06/14/2010 13. Date TD: 06/23/2010 14. Date Casing Set or D&A: 06/24/2010

## 15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 4514 TVD\*\* 4110 17 Plug Back Total Depth MD 4514 TVD\*\* 411018. Elevations GR 5285 KB 5296

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:

Gamma Ray  
Array Induction  
Caliper  
Temperature

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	16		0	65	39	0	65	VISU
SURF	12+1/4	9+5/8	32.3	0	720	331	0	720	VISU
1ST	8+3/4	7	23	0	3,870	75	3,400	3,870	CALC

### 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	
PIERRE	0	3,944	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	3,944	4,514	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Core: 4324-4339' MD

Comment:

A 6 1/4" hole was drilled to TD. Production casing was not ran in the hole.

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

Signed: \_\_\_\_\_ Print Name: Moe Felman

Title: Drilling Manager Date: 11/3/2010 Email: moe.felman@cometridgeresources.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400106051	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
2072216	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 checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400085440	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400091707	LAS-TEMPERATURE	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400106047	LAS-INDUCTION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	REC D/S PROFILE	3/23/2011 7:43:54 AM
Permit	req D/S profile.	3/22/2011 11:02:44 AM

Total: 2 comment(s)