

FORM
5Rev
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:

400154240

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: 10110 4. Contact Name: Lisa Pfizenmaier
2. Name of Operator: GREAT WESTERN OIL & GAS COMPANY LLC Phone: (970) 686-8831
3. Address: 503 MAIN ST Fax: _____
City: WINDSOR State: CO Zip: 80550

5. API Number 05-123-32957-00 6. County: WELD
7. Well Name: GUSTAFSON Well Number: 31-12
8. Location: QtrQtr: NENW Section: 31 Township: 7N Range: 65W Meridian: 6
Footage at surface: Distance: 1313 feet Direction: FNL Distance: 1497 feet Direction: FWL
As Drilled Latitude: 40.535470 As Drilled Longitude: -104.710420

GPS Data:

Data of Measurement: 04/04/2011 PDOP Reading: 2.6 GPS Instrument Operator's Name: Curt Acklam

** If directional footage

at Top of Prod. Zone Distance: 1998 feet Direction: FNL Distance: 631 feet Direction: FWL
Sec: 31 Twp: 7N Rng: 65W
at Bottom Hole Distance: 1998 feet Direction: FNL Distance: 631 feet Direction: FWL
Sec: 31 Twp: 7N Rng: 65W

9. Field Name: EATON 10. Field Number: 19350

11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 03/11/2011 13. Date TD: 03/16/2011 14. Date Casing Set or D&A: 03/19/2011

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 7607 TVD 7456 17 Plug Back Total Depth MD 7538 TVD 738718. Elevations GR 4825 KB 4841

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 CCL Cement Bond VDL only;
No problems drilling well, during pipe lay down a tite hole was found from below the Sussex thru the Parkman formations.
Open Hole Logs were cancelled.

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	24	0	552	430	0	552	CALC
1ST	7+7/8	4+1/2	11.6	0	7,567	600	2,530	7,567	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	
GREELEY SAND	2,980		<input type="checkbox"/>	<input type="checkbox"/>	Measured depth from prognosis
PARKMAN	3,903		<input type="checkbox"/>	<input type="checkbox"/>	Tite hole found from below Sussex thru Parkman. Measured depth from prognosis
SUSSEX	4,630		<input type="checkbox"/>	<input type="checkbox"/>	Tite hole found from below Sussex thru Parkman. Measured depth from prognosis.
NIOBRARA	7,114		<input type="checkbox"/>	<input type="checkbox"/>	from ROP
FORT HAYS	7,388		<input type="checkbox"/>	<input type="checkbox"/>	from ROP
CODELL	7,420		<input type="checkbox"/>	<input type="checkbox"/>	from ROP

Comment:

No open hole logs were run due to tite hole from below Sussex through the Parkman formations. No probelms drilling well.

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

Signed: _____ Print Name: Lisa Pfizenmaier

Title: Permit Technician Date: _____ Email: lpfizenmaier@gwogco.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: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name
400154257	CEMENT JOB SUMMARY
400154765	

Total Attach: 2 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)