

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:

400168979

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: 100264 4. Contact Name: Wanett McCauley
 2. Name of Operator: XTO ENERGY INC Phone: (505) 333-3630
 3. Address: 382 CR 3100 Fax: (505) 333-3284
 City: AZTEC State: NM Zip: 87410

5. API Number 05-071-09849-00 6. County: LAS ANIMAS
 7. Well Name: HILL RANCH Well Number: 12-04
 8. Location: QtrQtr: NWNW Section: 12 Township: 35S Range: 68W Meridian: 6
 Footage at surface: Distance: 720 feet Direction: FNL Distance: 751 feet Direction: FWL
 As Drilled Latitude: 37.016965 As Drilled Longitude: -104.953128

GPS Data:
 Data of Measurement: 06/07/2011 PDOP Reading: 5.9 GPS Instrument Operator's Name: Gary Terry

** If directional footage
 at Top of Prod. Zone Distance: _____ feet Direction: _____ Distance: _____ feet Direction: _____
 Sec: _____ Twp: _____ Rng: _____
 at Bottom Hole Distance: _____ feet Direction: _____ Distance: _____ feet Direction: _____
 Sec: _____ Twp: _____ Rng: _____

9. Field Name: PURGATOIRE RIVER 10. Field Number: 70830
 11. Federal, Indian or State Lease Number: _____
 12. Spud Date: (when the 1st bit hit the dirt) 05/23/2011 13. Date TD: 05/25/2011 14. Date Casing Set or D&A: 05/26/2011

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

16. Total Depth MD 1950 TVD _____ 17 Plug Back Total Depth MD 1902 TVD _____

18. Elevations GR 8575 KB 8578 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:
Triple Combo, 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
CONDUCTOR	17+1/2	13+3/8	46	0	46	65	0	46	VISU
SURF	11	8+5/8	24	0	483	215	0	215	VISU
1ST	7+7/8	5+1/2	15.5	0	1,950	270	48	1,950	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	
RATON COAL	0		<input type="checkbox"/>	<input type="checkbox"/>	
VERMEJO COAL	1,041		<input type="checkbox"/>	<input type="checkbox"/>	
TRINIDAD	1,328		<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: Wanett McCauley

Title: Reg Compliance Technician Date: _____ Email: wanett_mccauley@xtoenergy.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
400173947	CEMENT JOB SUMMARY
400173953	CEMENT JOB SUMMARY
400173954	CEMENT JOB SUMMARY
400177486	LAS-CEMENT BOND
400177487	LAS-COMBINATION OPEN HOLE

Total Attach: 5 Files

General Comments

User Group **Comment** **Comment Date**

User Group	Comment	Comment Date

Total: 0 comment(s)