

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:  
2592521

**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: 24461 4. Contact Name: BILL WARBURTON  
 2. Name of Operator: DIVERSIFIED OPERATING CORPORATION Phone: (303) 384-9611  
 3. Address: 15000 W 6TH AVE STE 102 Fax: (303) 384-9612  
 City: GOLDEN State: CO Zip: 80401

5. API Number 05-123-31744-00 6. County: WELD  
 7. Well Name: HILLMAN Well Number: 9-1  
 8. Location: QtrQtr: NENE Section: 9 Township: 10N Range: 59W Meridian: 6  
 Footage at surface: Distance: 610 feet Direction: FNL Distance: 660 feet Direction: FEL  
 As Drilled Latitude: 40.857170 As Drilled Longitude: -103.976574

GPS Data:

Data of Measurement: 12/17/2010 PDOP Reading: 1.8 GPS Instrument Operator's Name: BOB MCCORMICK

\*\* 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: WILDCAT 10. Field Number: 99999

11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 10/07/2010 13. Date TD: 10/13/2010 14. Date Casing Set or D&A: 10/15/2010

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 8378 TVD\*\* \_\_\_\_\_ 17 Plug Back Total Depth MD 7524 TVD\*\* \_\_\_\_\_

18. Elevations GR 5101 KB 5117

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:

COMPENSATED DENSITY COMPENSATED NEUTORN MICROLOG, DUAL INDUCTION GAMMA RAY, 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
SURF	12+1/4	8+5/8		0	799	340	0	799	CALC
1ST	7+7/8	4+1/2		0	7,677	290	5,345	7,699	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	
NIOBRARA	6,150	6,470	<input type="checkbox"/>	<input type="checkbox"/>	
D SAND	7,010	7,020	<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,094	7,160	<input type="checkbox"/>	<input type="checkbox"/>	
SUNDANCE	7,558	7,564	<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: BILL WARBURTON

Title: PETROLEUM ENGINEER Date: 1/6/2011 Email: WLW@DOCCOLO.COM

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
	CMT Summary *	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" 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>			
2592521	FORM 5 SUBMITTED	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	PER BILL WARBURTON @DOC, THIS WAS A TURNKEY DRILLING PROJECT WITH EXCEL DRILLING, DOC DID NOT PAY FOR THE SURFACE CEMENT JOB AND HAS NO TICKETS.	6/16/2011 8:14:47 AM
Permit	req digital CBL and cmt tkts	6/15/2011 12:53:27 PM

Total: 2 comment(s)