

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



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Document Number:
400166698

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: Jeff Glossa
 2. Name of Operator: PETROLEUM DEVELOPMENT CORPORATION Phone: (303) 831-3972
 3. Address: 1775 SHERMAN STREET - STE 3000 Fax: (303) 860-5838
 City: DENVER State: CO Zip: 80203

5. API Number 05-123-31150-00 6. County: WELD
 7. Well Name: Binder Well Number: 10-CDU
 8. Location: QtrQtr: SENW Section: 10 Township: 4N Range: 67W Meridian: 6
 Footage at surface: Distance: 2353 feet Direction: FNL Distance: 2624 feet Direction: FWL
 As Drilled Latitude: 40.327640 As Drilled Longitude: -104.877190

GPS Data:
 Date of Measurement: 02/06/2011 PDOP Reading: 1.5 GPS Instrument Operator's Name: Holly L. Tracy

** If directional footage at Top of Prod. Zone Dist.: 1352 feet. Direction: FNL Dist.: 1351 feet. Direction: FEL
 Sec: 10 Twp: 4N Rng: 67W
 ** If directional footage at Bottom Hole Dist.: 1356 feet. Direction: FNL Dist.: 1340 feet. Direction: FEL
 Sec: 10 Twp: 4N Rng: 67W

9. Field Name: WATTENBERG 10. Field Number: 90750
 11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 11/23/2010 13. Date TD: 11/26/2010 14. Date Casing Set or D&A: 11/27/2010

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

16. Total Depth MD 7708 TVD** 7390 17 Plug Back Total Depth MD 7641 TVD** 7323

18. Elevations GR 4780 KB 4794 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, CNL/CDL/DIL

20. Casing, Liner and Cement:

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

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	416	300	0	416	CALC
1ST	7+7/8	4+1/2	11.6	0	7,674	1,040	0	7,674	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	
SUSSEX	3,740		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,310		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,197		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,505		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,526		<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: Jeff Glossa

Title: Sr Engineering Tech Date: 5/19/2011 Email: jglossa@petd.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400166705	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400166706	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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
400166698	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	Changed the BHL and Top Perf locations from Sec 7 4N 67W to sec 10 4N 67W per operators request.	5/19/2011 11:15:29 AM

Total: 1 comment(s)

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.