

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:
400134118

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: 10000 4. Contact Name: Kristina Lee
 2. Name of Operator: BP AMERICA PRODUCTION COMPANY Phone: (303) 659-9581
 3. Address: 501 WESTLAKE PARK BLVD Fax: (303) 659-8209
 City: HOUSTON State: TX Zip: 77079

5. API Number 05-067-09727-00 6. County: LA PLATA
 7. Well Name: DAUGHETEE, L.A. GU Well Number: 4
 8. Location: QtrQtr: NESW Section: 28 Township: 34N Range: 9W Meridian: M
 Footage at surface: Distance: 1978 feet Direction: FSL Distance: 1726 feet Direction: FWL
 As Drilled Latitude: 37.160171 As Drilled Longitude: -107.833889

GPS Data:
 Data of Measurement: 10/19/2009 PDOP Reading: 3.8 GPS Instrument Operator's Name: Brent Carter

** If directional footage at Top of Prod. Zone Dist.: 831 feet. Direction: FSL Dist.: 2205 feet. Direction: FWL
 Sec: 28 Twp: 34N Rng: 9W
 ** If directional footage at Bottom Hole Dist.: 786 feet. Direction: FSL Dist.: 2221 feet. Direction: FWL
 Sec: 28 Twp: 34N Rng: 9W

9. Field Name: IGNACIO BLANCO 10. Field Number: 38300
 11. Federal, Indian or State Lease Number: Fee

12. Spud Date: (when the 1st bit hit the dirt) 09/29/2009 13. Date TD: 10/02/2009 14. Date Casing Set or D&A: 10/03/2009

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

16. Total Depth MD 3690 TVD** 3330 17 Plug Back Total Depth MD 3636 TVD** 3276

18. Elevations GR 6752 KB 6768 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 and Porosity logs, cased hole dynamics

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
CONDUCTOR				0	24				
SURF	12+1/4	8+5/8	24	0	479	380	0	488	CALC
1ST	7+7/8	5+1/2	15.5	0	3,680	320	1,590	3,690	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	
FRUITLAND	3,033	3,437	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Deviation and cement summaries were submitted with the preliminary form 5 11/30/2009.

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

Signed: _____ Print Name: Kristina Lee

Title: Regulatory Consultant -BP Date: 2/17/2011 Email: leeka@bp.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
	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"/>
Other Attachments			
400134118	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400134438	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	prelim form 5 doc#2609816	7/7/2011 2:05:09 PM

Total: 1 comment(s)