

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:
400191147

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: 28700
2. Name of Operator: EXXON MOBIL OIL CORPORATION
3. Address: P O BOX 4358 WGR RM 310
City: HOUSTON State: TX Zip: 77210-
4. Contact Name: Lynn Neely
Phone: (281) 654-1949
Fax: (281) 654-1940

5. API Number 05-103-07478-00
6. County: RIO BLANCO
7. Well Name: U S A-PICEANCE CREEK Well Number: F13-1G
8. Location: QtrQtr: NWSW Section: 1 Township: 2S Range: 97W Meridian: 6
Footage at surface: Distance: 1721 feet Direction: FSL Distance: 950 feet Direction: FWL
As Drilled Latitude: 39.903370 As Drilled Longitude: -108.235020

GPS Data:
Data of Measurement: 12/09/2009 PDOP Reading: 2.3 GPS Instrument Operator's Name: J. Mitchell

** 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: PICEANCE CREEK 10. Field Number: 68800
11. Federal, Indian or State Lease Number: 45410

12. Spud Date: (when the 1st bit hit the dirt) 09/19/1972 13. Date TD: 09/25/1972 14. Date Casing Set or D&A: 09/27/1972

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

16. Total Depth MD 3100 TVD 17 Plug Back Total Depth MD 3046 TVD

18. Elevations GR 6700 KB 6695
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:

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	608	350	0	608	CALC
2ND	6+1/8	4+1/2	9.5	0	3,100	600	1,530	3,100	CALC

ADDITIONAL CEMENT

Cement work date: 09/28/2010

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
SQUEEZE	2ND	1,750	120	1,450	1,750

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	
WASATCH A	2,202	3,100	<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: Lynn Neely

Title: Sr Regulatory Specialist Date: _____ Email: lynn.r.neely@exxonmobil.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
400191152	CEMENT JOB SUMMARY

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)