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

DRILLING COMPLETION REPORT

Document Number:

400149531

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: 96340
4. Contact Name: Jack Fincham
2. Name of Operator: WIEPKING-FULLERTON ENERGY LLC
Phone: (303) 906-3335
3. Address: 4600 S DOWNING ST
Fax: (303) 761-9067
City: ENGLEWOOD   State: CO   Zip: 80113

5. API Number   05-073-06434-00
6. County: LINCOLN
7. Well Name: Kerry
Well Number: # 2
8. Location: QtrQtr: SWSW   Section: 20   Township: 10S   Range: 55W   Meridian: 6
Footage at surface: Distance: 620 feet   Direction: FSL   Distance: 620 feet   Direction: FWL
As Drilled Latitude: 39.158570   As Drilled Longitude: -103.582490

GPS Data:
Data of Measurement: 04/04/2011   PDOP Reading: 2.1   GPS Instrument Operator's Name: Keith Westfall

** 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: GREAT PLAINS
10. Field Number: 32756
11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 01/27/2011 13. Date TD: 02/14/2011 14. Date Casing Set or D&A: 02/17/2011

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

16. Total Depth   MD 7900   TVD** _____   17 Plug Back Total Depth   MD 7355   TVD** _____

18. Elevations   GR 5217   KB 5230   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:

Dual Induction Guard Log Gamma Ray
Compensated Density Compensated Neutron Gamma Ray
Radial Cement Bond Log

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	323	250	0	323	CALC
1ST	7+7/8	5+1/2	17	0	7,355	135	3,050	7,355	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	3,124		☐	☐	
CODELL	3,641		☐	☐	
DAKOTA	4,082		☐	☐	
SHAWNEE	5,684		☐	☐	
LANSING	6,631		☐	☐	
MARMATON	6,965		☒	☐	
CHEROKEE	7,097		☒	☐	
MORROW	7,620		☒	☐	
MORROW V-11	7,764		☒	☐	
KEYES	7,814		☐	☐	

Comment:

Request information be confidential

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

Signed: _____   Print Name: Jack _____

Title: Fincham _____   Date: _____4/22/2011_____   Email: fincham4@msn.com _____

Attachment Check List

Att Doc Num	Document Name	attached ?

Attachment Checklist

Att Doc Num	Document Name				
400156822	CMT Summary *	Yes ☒	No ☐
	Core Analysis	Yes ☐	No ☒
	Directional Survey **	Yes ☐	No ☒
400157292	DST Analysis	Yes ☒	No ☐
	Logs	Yes ☒	No ☐
400156824	Other	Yes ☒	No ☐

Other Attachments

Att Doc Num	Document Name		
400149531	FORM 5 SUBMITTED	Yes ☒	No ☐
400156056	PDF-CEMENT BOND	Yes ☒	No ☐
400156059	LAS-DUAL INDUCTION	Yes ☒	No ☐

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)