

FORM
5Rev
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:

400135399

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: 10334

4. Contact Name: CLAYTON DOKE

2. Name of Operator: SLAWSON EXPLORATION COMPANY INC

Phone: (970) 669-7411

3. Address: 1675 BROADWAY - SUITE 1600

Fax: (970) 669-4077

City: DENVER State: CO Zip: 80202

5. API Number 05-123-31719-00

6. County: WELD

7. Well Name: JOKER

Well Number: 36-9-62

8. Location: QtrQtr: NW NW Section: 36 Township: 9N Range: 62W Meridian: 6

Footage at surface: Distance: 600 feet Direction: FNL Distance: 600 feet Direction: FWL

As Drilled Latitude: 40.710350 As Drilled Longitude: -104.275530

GPS Data:

Data of Measurement: 02/21/2011 PDOP Reading: 2.5 GPS Instrument Operator's Name: ADAM KELLEY

** If directional footage at Top of Prod. Zone Dist.: 1096 feet. Direction: FNL Dist.: 1150 feet. Direction: FWL

Sec: 36 Twp: 9N Rng: 62W

** If directional footage at Bottom Hole Dist.: 1097 feet. Direction: FNL Dist.: 1255 feet. Direction: FEL

Sec: 36 Twp: 9N Rng: 62W

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number: 8660.5

12. Spud Date: (when the 1st bit hit the dirt) 09/27/2010 13. Date TD: 02/11/2011 14. Date Casing Set or D&A: 02/14/2011

15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 11368 TVD** 6670 17 Plug Back Total Depth MD 11368 TVD** 6670

18. Elevations GR 4964 KB 4984

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:

GR, CBL, No openhole logs were 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

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	
			<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Well was originally spudded 9/27/10. Surface was drilled and casing set, drilling activity was suspended on 09/29/10 due to availability of an appropriately sized rig. A preliminary Form 5 (doc #: 400101889) detailing the work done to that point was submitted as notice per rule 308a.

Drilling activity at this site re-commenced 01/23/11.

Form 5a (Document #400151882) in related forms remains in DRAFT status pending acquisition of appropriate data. It will be submitted as soon as is practicable.

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

Signed: _____ Print Name: CLAYTON DOKE

Title: ENGINEER Date: 4/11/2011 Email: cdoke@petersonenergy.com

Attachment Check List

Att Doc Num	Document Name	attached ?
Attachment Checklist		
		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

General Comments

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

Total: 0 comment(s)