

FORM
5Rev
02/08State 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:

400197546

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: 16700

2. Name of Operator: CHEVRON PRODUCTION COMPANY

3. Address: 100 CHEVRON RD

City: RANGELY State: CO Zip: 81648

4. Contact Name: DIANE PETERSON

Phone: (970) 675-3842

Fax: (970) 675-3800

5. API Number 05-103-11858-00

6. County: RIO BLANCO

7. Well Name: EMERALD

Well Number: 93X

8. Location: QtrQtr: SESE Section: 26 Township: 2N Range: 103W Meridian: 6

Footage at surface: Distance: 1646 feet Direction: FSL Distance: 1049 feet Direction: FEL

As Drilled Latitude: 40.111290 As Drilled Longitude: -108.918016

GPS Data:

Data of Measurement: 07/14/2011 PDOP Reading: 1.1 GPS Instrument Operator's Name: J FLOYD

** If directional footage

at Top of Prod. Zone Distance: 1733 feet Direction: FSL Distance: 2170 feet Direction: FEL

Sec: 26 Twp: 2N Rng: 103W

at Bottom Hole Distance: 1750 feet Direction: FSL Distance: 2181 feet Direction: FEL

Sec: 26 Twp: 2N Rng: 103W

9. Field Name: RANGELY

10. Field Number: 72370

11. Federal, Indian or State Lease Number: FEE

12. Spud Date: (when the 1st bit hit the dirt) 05/09/2011 13. Date TD: 06/28/2011 14. Date Casing Set or D&A: 06/28/2011

15. Well Classification:

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

16. Total Depth MD 6428 TVD 6245 17 Plug Back Total Depth MD 6428 TVD

18. Elevations GR 5519 KB 5535

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:

CEMENT BOND
ARRAY INDUCTION
COMPENSATED NEUTRON
TRIPLE COMBO

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
CONDUCTOR	12+1/4	9+5/8	36	0	1,989	845	0	1,989	VISU
1ST	8+3/4	7+0/8	23	0	6,428	790		6,428	CALC

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	
WEBER	6,621	6,866	<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: DIANE L PETERSON

Title: REGULATORY SPECIALIST

Date: _____

Email: DLPE@CHEVRON.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
400197568	CEMENT JOB SUMMARY
400197593	DIRECTIONAL SURVEY
400197594	OTHER
400197601	CEMENT JOB SUMMARY

Total Attach: 4 Files

General Comments

User Group Comment Comment Date

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Total: 0 comment(s)