

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:

400160450

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: 10276 4. Contact Name: Paul Gottlob
 2. Name of Operator: PINE RIDGE OIL & GAS LLC Phone: (303) 226-1316
 3. Address: 600 17TH ST STE 800S Fax: (303) 226-1301
 City: DENVER State: CO Zip: 80202

5. API Number 05-043-06201-00 6. County: FREMONT
 7. Well Name: MACKINAW Well Number: 12-28
 8. Location: QtrQtr: SWNW Section: 28 Township: 19S Range: 69W Meridian: 6
 Footage at surface: Distance: 2149 feet Direction: FNL Distance: 981 feet Direction: FWL
 As Drilled Latitude: 38.368207 As Drilled Longitude: -105.122297

GPS Data:
 Data of Measurement: 05/06/2011 PDOP Reading: 1.9 GPS Instrument Operator's Name: Chris Pearson

** If directional footage
 at Top of Prod. Zone Distance: 2156 feet Direction: FNL Distance: 1142 feet Direction: FWL
 Sec: 28 Twp: 19S Rng: 69W
 at Bottom Hole Distance: 2246 feet Direction: FNL Distance: 1722 feet Direction: FWL
 Sec: 28 Twp: 19S Rng: 69W

9. Field Name: FLORENCE-CANON CITY 10. Field Number: 24600
 11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 04/05/2011 13. Date TD: 04/17/2011 14. Date Casing Set or D&A: 04/18/2011

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

16. Total Depth MD 3400 TVD 3174 17 Plug Back Total Depth MD 3383 TVD 3161

18. Elevations GR 5355 KB 5366 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:
Caliper 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
CONDUCTOR	24	16	1/4	0	71	6	0	71	
SURF	12+1/4	8+5/8	24	0	623	212	0	623	
1ST	7+7/8	5+1/2	11.6	0	3,383		0	3,383	

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	
PIERRE	2,548	3,383	<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: Moe Felman

Title: Manager of Drilling Date: _____ Email: moe.felman@cometridgeresources.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
400171374	DIRECTIONAL SURVEY
400171375	DIRECTIONAL SURVEY
400173179	CEMENT JOB SUMMARY
400173180	LAS-CALIPER
400174279	CEMENT JOB SUMMARY
400206215	WELLBORE DIAGRAM

Total Attach: 6 Files

General Comments

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

Total: 0 comment(s)