

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:
400213407

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: 16830
2. Name of Operator: CHOLLA PRODUCTION LLC
3. Address: 7851 S ELATI ST STE 201
City: LITTLETON State: CO Zip: 80120
4. Contact Name: EMILY HUNDLEY-GOFF
Phone: (303) 623-4565
Fax: (303) 623-5062

5. API Number 05-009-06249-00
6. County: BACA
7. Well Name: BALDWIN Well Number: 1-18
8. Location: QtrQtr: SW NE Section: 18 Township: 32S Range: 44W Meridian: 6
Footage at surface: Distance: 2099 feet Direction: FNL Distance: 1970 feet Direction: FEL
As Drilled Latitude: 37.259860 As Drilled Longitude: -102.411080

GPS Data:
Data of Measurement: 08/24/2011 PDOP Reading: 2.3 GPS Instrument Operator's Name: KEITH WESTFALL

** 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: WILDCAT 10. Field Number: 99999
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 06/15/2011 13. Date TD: 06/20/2011 14. Date Casing Set or D&A: 06/22/2011

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

16. Total Depth MD 652 TVD 17 Plug Back Total Depth MD 0 TVD

18. Elevations GR 4126 KB 4126
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:
NO 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
CONDUCTOR	15+1/2	13+3/8	38	0	126	150	0	126	VISU
SURF	12+1/4	8+5/8	24	652	1,662	250	652	1,662	CALC

ADDITIONAL CEMENT

Cement work date:

Details of work:

COULD NOT GET INTO OLD SURFACE CASING. PER CRAIG QUINT - FILLED HOLE WITH CEMENT FROM TOP OF OLD 8 5/8" CASING AT 652' TO SURFACE.

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:

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

Signed: _____ Print Name: EMILY HUNDLEY-GOFF

Title: OWNER/MANAGER Date: _____ Email: cholla_production@msn.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
400213409	WELLBORE DIAGRAM
400213940	CEMENT JOB SUMMARY

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)