

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:

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## 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: 46290

4. Contact Name: Sherry Glass

2. Name of Operator: K P KAUFFMAN COMPANY INC

Phone: (303) 825-4822

3. Address: 1675 BROADWAY, STE 2800

Fax: (303) 825-4825

City: DENVER State: CO Zip: 80202

5. API Number 05-123-32872-00

6. County: WELD

7. Well Name: NRC

Well Number: #9-9-15H

8. Location: QtrQtr: NESE Section: 9 Township: 1N Range: 67W Meridian: 6

Footage at surface: Distance: 1971 feet Direction: FSL Distance: 674 feet Direction: FEL

As Drilled Latitude: 40.063710 As Drilled Longitude: -104.888730

## GPS Data:

Date of Measurement: 06/16/2011 PDOP Reading: 1.6 GPS Instrument Operator's Name: R. Gorka

\*\* If directional footage at Top of Prod. Zone Dist.: 1945 feet. Direction: FSL Dist.: 947 feet. Direction: FEL

Sec: 9 Twp: 1N Rng: 67W

\*\* If directional footage at Bottom Hole Dist.: 793 feet. Direction: FSL Dist.: 2153 feet. Direction: FEL

Sec: 9 Twp: 1N Rng: 67W

9. Field Name: SPINDLE

10. Field Number: 77900

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 04/30/2011 13. Date TD: 05/11/2011 14. Date Casing Set or D&amp;A: 05/11/2011

## 15. Well Classification:

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

16. Total Depth MD 6616 TVD\*\* 4751 17 Plug Back Total Depth MD TVD\*\*

18. Elevations GR 5030 KB 5046

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:

L-plot logs

## 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	9+5/8	40	0	1,039	630	0	1,047	VISU
1ST	8+3/4	7	26	3000	5,106	220	3,000	5,106	CALC
2ND	6+1/4	4+1/2	11.6	0	6,605	200	0	6,616	CALC

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

Details of work:

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	
PARKMAN	4,229		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,866		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FORM 4 SUBMITTED REQUESTING CONFIDENTIALITY STATUS

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

Signed: \_\_\_\_\_ Print Name: Sherry Glass

Title: Engineering Technician Date: \_\_\_\_\_ Email: sglass@kpk.com

The subreport 'subreport3' could not be found at the specified location W:\inetpub\Net\Reports\AttachListNew.rdlc. Please

### General Comments

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

Total: 0 comment(s)