

Document Number:
 400229491

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: 69175 4. Contact Name: Jeff Glossa
 2. Name of Operator: PETROLEUM DEVELOPMENT CORPORATION Phone: (303) 831-3972
 3. Address: 1775 SHERMAN STREET - STE 3000 Fax: (303) 860-5838
 City: DENVER State: CO Zip: 80203

5. API Number 05-045-19810-00 6. County: GARFIELD
 7. Well Name: Puckett Well Number: 11C-36D
 8. Location: QtrQtr: Lot 4 Section: 36 Township: 6S Range: 97W Meridian: 6
 Footage at surface: Distance: 647 feet Direction: FNL Distance: 937 feet Direction: FWL
 As Drilled Latitude: 39.485000 As Drilled Longitude: -108.174730

GPS Data:
 Date of Measurement: 11/26/2011 PDOP Reading: 2.0 GPS Instrument Operator's Name: Holly L. Tracy

** If directional footage at Top of Prod. Zone Dist.: _____ feet. Direction: _____ Dist.: _____ feet. Direction: _____
 Sec: 36 Twp: 6S Rng: 97W
 ** If directional footage at Bottom Hole Dist.: 760 feet. Direction: FNL Dist.: 152 feet. Direction: FWL
 Sec: 36 Twp: 6S Rng: 97W

9. Field Name: GRAND VALLEY 10. Field Number: 31290
 11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 04/28/2011 13. Date TD: 05/09/2011 14. Date Casing Set or D&A: 05/11/2011

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

16. Total Depth MD 9020 TVD** 8972 17 Plug Back Total Depth MD _____ TVD** _____

18. Elevations GR 8369 KB 8393 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:
PNDL/GR, CBL/GR

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	20		0	100	100	0	100	CALC
SURF	17+1/2	9+5/8	36	0	2,069	1,711	0	2,069	CALC
1ST	8+3/4	4+1/2	11.6	0	8,992	950	2,300	8,992	CBL

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	
WASATCH G	4,406		<input type="checkbox"/>	<input type="checkbox"/>	
FORT UNION	4,594		<input type="checkbox"/>	<input type="checkbox"/>	
WILLIAMS FORK	5,989		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	8,435		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	8,772		<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: Jeff Glossa _____

Title: Sr Engineering Tech _____

Date: _____

Email: jglossa@petd.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)