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Document Number:
 2286212

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: 31257 4. Contact Name: GENE FRITZLER
 2. Name of Operator: FRITZLER RESOURCES INC Phone: (970) 867-9388
 3. Address: P O BOX 114 Fax: (970) 867-5413
 City: FORT MORGAN State: CO Zip: 80701

5. API Number 05-121-11012-00 6. County: WASHINGTON
 7. Well Name: BOERSMA FARMS Well Number: 1
 8. Location: QtrQtr: SWSW Section: 23 Township: 3S Range: 56W Meridian: 6
 Footage at surface: Distance: 990 feet Direction: FSL Distance: 990 feet Direction: FWL
 As Drilled Latitude: 39.771920 As Drilled Longitude: -103.627230

GPS Data:
 Date of Measurement: 07/21/2011 PDOP Reading: 1.7 GPS Instrument Operator's Name: TIM LIEBERT

** If directional footage at Top of Prod. Zone Dist.: _____ feet. Direction: _____ Dist.: _____ feet. Direction: _____
 Sec: _____ Twp: _____ Rng: _____
 ** If directional footage at Bottom Hole Dist.: _____ feet. Direction: _____ Dist.: _____ feet. Direction: _____
 Sec: _____ Twp: _____ Rng: _____

9. Field Name: LANCE 10. Field Number: 48000
 11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 11/14/2011 13. Date TD: 11/21/2011 14. Date Casing Set or D&A: 11/22/2011

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

16. Total Depth MD 5156 TVD** _____ 17 Plug Back Total Depth MD _____ TVD** _____

18. Elevations GR 4837 KB 4845 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:

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	8+5/8		0	154	180	0	154	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	
NIOBRARA	4,095		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	4,556		<input type="checkbox"/>	<input type="checkbox"/>	
CARLILE	4,612		<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	4,701		<input type="checkbox"/>	<input type="checkbox"/>	
D SAND	5,005		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	5,160		<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: DAVIS WINSLOW
 Title: ENGINEER Date: 11/30/2011 Email: DAVEWINSLOW1@CS.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
2531643	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Other Attachments			
2286212	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
2286214	OPERATIONS SUMMARY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400232657	LAS-INDUCTION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Engineer	there is an outstanding Form 6 for this well.	12/27/2011 8:51:51 AM
Permit	Recieved cement ticket and sent to scanning.	12/16/2011 7:48:04 AM
Permit	Recieved logs 12/1/2011 Reusted LAS and cement tickets 12/14/2011	12/14/2011 6:37:04 AM
Permit	Added Spud Date, Date TD, Casing/D&A Date, and Well Classification per D. Winslow.	12/13/2011 12:53:55 PM

Total: 4 comment(s)