

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:

400252119

## 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: 61250

4. Contact Name: MARK SHREVE

2. Name of Operator: MULL DRILLING COMPANY INC

Phone: (316) 264-6366

3. Address: 1700 N WATERFRONT PKWY B#1200

Fax: (316) 264-6440

City: WICHITA State: KS Zip: 67206-

5. API Number 05-061-06867-00

6. County: KIOWA

7. Well Name: MCBRIDE-MICHEL "A"

Well Number: 1-31

8. Location: QtrQtr: NWNE Section: 31 Township: 18S Range: 45W Meridian: 6

Footage at surface: Distance: 605 feet Direction: FNL Distance: 2400 feet Direction: FEL

As Drilled Latitude: As Drilled Longitude:

## GPS Data:

Data of Measurement: PDOP Reading: GPS Instrument Operator's Name:

\*\* 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: BRANDON

10. Field Number: 7500

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 01/12/2012 13. Date TD: 01/28/2012 14. Date Casing Set or D&amp;A: 01/29/2012

## 15. Well Classification:

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

16. Total Depth MD 4918 TVD\*\* 17 Plug Back Total Depth MD TVD\*\*

18. Elevations GR 3904 KB 3915

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:

CDL/CNL/PE  
DIL  
MEL  
SONIC

## 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	24	0	355	265	0	355	CALC
1ST	7+7/8	4+1/2	11.6	0	4,801	275		4,801	CBL

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: 02/10/2012

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
STAGE TOOL	STAGE TOOL	2,233	350	0	2,233

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	
SHAWNEE	3,382		<input type="checkbox"/>	<input type="checkbox"/>	
HEEBNER	3,579		<input type="checkbox"/>	<input type="checkbox"/>	
LANSING	3,610		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
MARMATON	3,989		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
FORT SCOTT	4,072		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	4,127		<input type="checkbox"/>	<input type="checkbox"/>	
ATOKA	4,266		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	4,397		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
MISSISSIPPIAN	4,602		<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Comment:

WAITING ON POST SURVEY TO COMPLETE AS DRILLED INFO. WILL SEND FINAL FORM 5 AS SOON AS THIS INFORMATION IS RECEIVED.

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

Signed: \_\_\_\_\_

Print Name: MARK SHREVE

Title: PRESIDENT/COO

Date:

Email: MSHREVE@MULLDRILLING.COM

**Attachment Check List**

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400256156	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"/>
400256149	DST Analysis	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Logs	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

**General Comments****User Group****Comment****Comment Date**

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Total: 0 comment(s)