

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



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Document Number:
400245169

Date Received:
01/26/2012

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: 10338 4. Contact Name: Tina Taylor
 2. Name of Operator: CARRIZO OIL & GAS INC Phone: (713) 328-1000
 3. Address: 500 DALLAS STREET #2300 Fax: (713) 328-1060
 City: HOUSTON State: TX Zip: 77002

5. API Number 05-123-34387-00 6. County: WELD
 7. Well Name: Barracuda Well Number: 20-14-7-60
 8. Location: QtrQtr: SWSW Section: 20 Township: 7N Range: 60W Meridian: 6
 Footage at surface: Distance: 400 feet Direction: FSL Distance: 600 feet Direction: FWL
 As Drilled Latitude: 40.554520 As Drilled Longitude: -104.125470

GPS Data:
 Date of Measurement: 08/15/2011 PDOP Reading: 2.4 GPS Instrument Operator's Name: George Allen

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

12. Spud Date: (when the 1st bit hit the dirt) 11/15/2011 13. Date TD: 12/01/2011 14. Date Casing Set or D&A: 12/03/2011

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

16. Total Depth MD 7003 TVD** _____ 17 Plug Back Total Depth MD 5578 TVD** _____

18. Elevations GR 4974 KB 4974 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:
CBL, Compensated Neutron, Induction

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	36	0	1,450	405	0	1,450	CALC
OPEN HOLE	8+3/4			5478	8,861				CALC

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 11/17/2011

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
	OPEN HOLE		155	6,585	7,047
	OPEN HOLE		155	6,122	6,585
	OPEN HOLE		270	5,622	6,122

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	
SHARON SPRINGS	6,154	6,341	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,341	6,511	<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	6,511	6,511	<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: Tina Taylor
 Title: Regulatory Compliance Date: 1/26/2012 Email: tina.taylor@crzo.net

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
2531903	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400245666	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input 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			
400245169	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400245665	LAS-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	Operator uploaded new logs to the database.	2/14/2012 12:18:00 PM
Permit	LAS and PDF's loaded to the database.	2/14/2012 12:04:21 PM
Permit	Waiting on LAS logs. Hard copy logs sent as attachments named other.	2/13/2012 11:00:41 AM

Total: 3 comment(s)