

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:
400211906

Date Received:
10/06/2011

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: 27742 4. Contact Name: Michelle Robles
2. Name of Operator: EOG RESOURCES INC Phone: (307) 276-4842
3. Address: 600 17TH ST STE 1100N Fax: (307) 276-3335
City: DENVER State: CO Zip: 80202

5. API Number 05-123-32697-00 6. County: WELD
7. Well Name: Lion Creek Well Number: 07-24H
8. Location: QtrQtr: SWSE Section: 24 Township: 11N Range: 64W Meridian: 6
Footage at surface: Distance: 501 feet Direction: FSL Distance: 1270 feet Direction: FEL
As Drilled Latitude: 40.901431 As Drilled Longitude: -104.489917

GPS Data:
Date of Measurement: 08/31/2011 PDOP Reading: 2.1 GPS Instrument Operator's Name: Robert L. Kay

** If directional footage at Top of Prod. Zone Dist.: 1055 feet. Direction: FSL Dist.: 1516 feet. Direction: FEL
Sec: 24 Twp: 11N Rng: 64W
** If directional footage at Bottom Hole Dist.: 638 feet. Direction: FNL Dist.: 1909 feet. Direction: FWL
Sec: 24 Twp: 11N Rng: 64W

9. Field Name: WILDCAT 10. Field Number: 99999
11. Federal, Indian or State Lease Number: Fee

12. Spud Date: (when the 1st bit hit the dirt) 01/27/2011 13. Date TD: 02/21/2011 14. Date Casing Set or D&A: 02/17/2011

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

16. Total Depth MD 11490 TVD** 7518 17 Plug Back Total Depth MD 11483 TVD** 7518

18. Elevations GR 5298 KB 5323 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/GR, LWD/GR, MUD

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	13+1/2	9+5/8	36	0	1,533	680	0	1,533	VISU
1ST	8+3/4	7	23	0	7,780	879	0	7,780	CBL
1ST LINER	6	4+1/2	11.6	6938	11,486				

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	
HYGIENE	4,454		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	7,657		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,756		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

ADDITIONAL FORMATION TOP: TERRY SS - 3,866'

CONFIDENTIAL

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

Signed: _____

Print Name: Michelle Robles

Title: Regulatory Assistant

Date: 10/6/2011

Email: Michelle_Robles@EOGResources.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400211932	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400211936	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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Other Attachments			
400211906	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400211925	PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Engineer	CBL not yet available in well file. Once cement confirmed, approved.	11/22/2011 9:54:55 AM
Permit	REC HARD COPY LOGS DOC#2204099-101, IN SCANNING	10/28/2011 11:19:56 AM
Permit	REQ HARD AND DIGITAL LOGS	10/12/2011 12:27:05 PM

Total: 3 comment(s)