

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



DE ET OE ES

Document Number:

1666829

Date Received:

02/04/2010

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: 46685  
2. Name of Operator: KINDER MORGAN CO2 CO LP  
3. Address: 17801 HWY 491  
City: CORTEZ State: CO Zip: 81321  
4. Contact Name: BOB CLAYTON  
Phone: (970) 882-5507  
Fax: (970) 882-5521

5. API Number 05-083-06458-00  
6. County: MONTEZUMA  
7. Well Name: MCELMO DOME UNIT 35-38-19  
Well Number: HE #3  
8. Location: QtrQtr: NE4SE4 Section: 35 Township: 38N Range: 19W Meridian: N  
Footage at surface: Distance: 2143 feet Direction: FSL Distance: 1271 feet Direction: FEL  
As Drilled Latitude: 37.507760 As Drilled Longitude: -108.908250

GPS Data:

Data of Measurement: 11/19/2008 PDOP Reading: 2.7 GPS Instrument Operator's Name: GERALD

\*\* 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: MCELMO 10. Field Number: 53674  
11. Federal, Indian or State Lease Number: COC-001713

12. Spud Date: (when the 1st bit hit the dirt) 10/18/1985 13. Date TD: 07/29/2009 14. Date Casing Set or D&A: 11/20/1985

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 8555 TVD\*\* 8555 17 Plug Back Total Depth MD TVD\*\*

18. Elevations GR 6449 KB 6477  
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
CONDUCTOR	20	16		0	109	40	0	109	CALC
SURF	14+3/4	10+3/4		0	2,939	1,900	0	2,939	CALC
1ST	9+1/2	7+5/8		0	8,149	2,700	0	8,149	CALC
OPEN HOLE	6+1/2					135	8,149	8,555	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	
LEADVILLE	8,141	8,356	<input type="checkbox"/>	<input type="checkbox"/>	6" PILOT HOLE WAS DEEPEMED FROM 8400-8555 FOR

Comment:

LOGGING PURPOSES. IT WAS CEMENTED OFF WITH 135 SX CLASS G CEMENT UP INSIDE THE 7 5/8" AND THEN DRESSED OFF TO THE KOP AT 8150'.

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

Signed: Y \_\_\_\_\_ Print Name: BOB CLAYTON \_\_\_\_\_

Title: OPERATIONS SUPERVISOR Date: 2/2/2010 Email: BOB\_CLAYTON@KIDNERMORGAN.COM

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
	CMT Summary *	Yes <input type="checkbox"/>	No <input checked="" 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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
1792246	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

User Group	Comment	Comment Date
Permit	No CBL or cmt report on sfc pipe for this 1985 vintage pilot hole section.	2/8/2012 12:48:05 PM

Total: 1 comment(s)