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Document Number:
400280512

Date Received:

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: 10322 4. Contact Name: Greg Francis
 2. Name of Operator: EAST CHEYENNE GAS STORAGE LLC Phone: (720) 351-4003
 3. Address: 10901 WEST TOLLER DRIVE - SUITE 200 Fax: (720) 351-4200
 City: LITTLETON State: CO Zip: 80127

5. API Number 05-075-07158-00 6. County: LOGAN
 7. Well Name: D Strange Well Number: 1
 8. Location: QtrQtr: SWSE Section: 6 Township: 11N Range: 52W Meridian: 6
 Footage at surface: Distance: 984 feet Direction: FSL Distance: 1634 feet Direction: FEL
 As Drilled Latitude: 40.951780 As Drilled Longitude: -103.216150

GPS Data:
 Date of Measurement: 12/13/2009 PDOP Reading: 2.3 GPS Instrument Operator's Name: Darren Veal

** 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: PEETZ WEST 10. Field Number: 68300
 11. Federal, Indian or State Lease Number: Fee

12. Spud Date: (when the 1st bit hit the dirt) 05/26/1952 13. Date TD: _____ 14. Date Casing Set or D&A: _____

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

16. Total Depth MD 5339 TVD** _____ 17 Plug Back Total Depth MD _____ TVD** _____

18. Elevations GR 4551 KB 4563 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:
 Electric log is available from MJ Systems. East Cheyenne Gas Storage, LLC is a licence user of MJ Systems data and can not distribute the log data. No mud log is available.
 Available CBL's have been attached.

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+5/8	9+5/8	25.4	0	215	180	0	215	CALC
1ST	6+3/4	5+1/2	15.5	0	5,358	200	4,420	5,358	

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 04/19/2010

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
STAGE TOOL	1ST	1,324	330	512	1,320

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	
D SAND	5,165	5,216	<input type="checkbox"/>	<input type="checkbox"/>	
HUNTSMAN	5,216	5,292	<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA-JSND	5,292		<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: Greg Francis

Title: Project Geologist Date: _____ Email: gfrancis@mehllc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400281245	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			
400280780	LAS-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400280786	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400281247	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)