FORM 5
Rev 02/08

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109

DRILLING COMPLETION REPORT

DE	ET	OE	ES

Document Number:

400243805

Date Received:

02/22/2012

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: 22400
2. Name of Operator: DJ PRODUCTION SERVICES INC
3. Address: 1273 FALCON COURT
   City: WINDSOR   State: CO   Zip: 80550

4. Contact Name: Jeff Reale
   Phone: (303) 947-1387
   Fax:

5. API Number   05-123-30725-00
6. County: WELD
7. Well Name: NELSON   Well Number: 5-21
8. Location: QtrQtr: NENW   Section: 5   Township: 4N   Range: 67W   Meridian: 6

Footage at surface: Distance: 647 feet Direction: FNL   Distance: 1880 feet Direction: FWL

As Drilled Latitude: 40.347280   As Drilled Longitude: -104.916990

GPS Data:

Data of Measurement: 01/25/2012   PDOP Reading: 2.2   GPS Instrument Operator's Name: C. Vanmatre

** 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: WATTENBERG   10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 11/07/2011 13. Date TD: 11/10/2011 14. Date Casing Set or D&A: 11/11/2011

15. Well Classification:

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

16. Total Depth MD 7176   TVD** _____   17 Plug Back Total Depth MD 7154   TVD** _____

18. Elevations GR 4832   KB 4848   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:

Density Neutron / Induction / CBL

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	549	430	0	549	VISU
1ST	7+7/8	4+1/2	11.5#	0	7,168	555	2,730	7,168	CBL

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	
PARKMAN	3,346		☐	☐	
SUSSEX	3,980		☐	☐	
SHANNON	4,394		☐	☐	
NIOBRARA	6,671		☐	☐	
FORT HAYS	6,973		☐	☐	
CODELL	6,995		☐	☐	

Comment:

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

Signed: _____   Print Name: Jeff Reale

Title: Agent   Date: 2/22/2012   Email: lam53@msn.com

Attachment Check List

Att Doc Num	Document Name	attached ?

Attachment Checklist

Att Doc Num	Document Name			
400253949	CMT Summary *	Yes ☒	No ☐
	Core Analysis	Yes ☐	No ☒
	Directional Survey **	Yes ☐	No ☒
	DST Analysis	Yes ☐	No ☒
	Logs	Yes ☒	No ☐
	Other	Yes ☐	No ☒

Other Attachments

Att Doc Num	Document Name		
400243805	FORM 5 SUBMITTED	Yes ☒	No ☐
400253438	LAS-COMBINATION OPEN HOLE	Yes ☒	No ☐
400253439	LAS-CBL 1ST RUN	Yes ☒	No ☐

General Comments

User Group	Comment	Comment Date
Permit	requesting form 5A.	4/19/2012 10:33:51 AM

Total: 1 comment(s)