

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



DE ET OE ES

Document Number:

2517749

Date Received:

09/28/2011

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: 10232 4. Contact Name: RANDY NATVIG
2. Name of Operator: LARAMIE ENERGY II, LLC Phone: (303) 339-4400
3. Address: 1512 LARIMER ST STE 1000 Fax: (303) 339-4399
City: DENVER State: CO Zip: 80202

5. API Number 05-077-10094-00 6. County: MESA
7. Well Name: BRUTON Well Number: 19-14B
8. Location: QtrQtr: SESW Section: 19 Township: 9S Range: 93W Meridian: 6
Footage at surface: Distance: 852 feet Direction: FSL Distance: 1750 feet Direction: FWL
As Drilled Latitude: 39.257720 As Drilled Longitude: -107.814620

GPS Data:
Date of Measurement: 05/09/2011 PDOP Reading: 2.1 GPS Instrument Operator's Name: DAVE MURREY

** If directional footage at Top of Prod. Zone Dist.: 838 feet. Direction: FSL Dist.: 1979 feet. Direction: FWL
Sec: 19 Twp: 9S Rng: 93W
** If directional footage at Bottom Hole Dist.: 781 feet. Direction: FSL Dist.: 1972 feet. Direction: FWL
Sec: 19 Twp: 9S Rng: 93W

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) 01/17/2011 13. Date TD: 02/18/2011 14. Date Casing Set or D&A: 02/23/2011

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

16. Total Depth MD 12360 TVD** 12348 17 Plug Back Total Depth MD 12307 TVD** 12295

18. Elevations GR 7345 KB 7366
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:
SD, DSN, ACTR, CSNGR, 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
CONDUCTOR	26	16		0	40	4	0	40	CALC
SURF	14+3/4	9+5/8		0	1,551	320	0	1,551	CALC
1ST	7+7/8	4+1/2		0	12,356	290	1,140	12,356	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	
ROLLINS	7,380		<input type="checkbox"/>	<input type="checkbox"/>	TIGHT HOLE
COZZETTE	7,800		<input type="checkbox"/>	<input type="checkbox"/>	
CORCORAN	8,000		<input type="checkbox"/>	<input type="checkbox"/>	INT CSG STRING RUN
MANCOS	8,215		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	11,142		<input type="checkbox"/>	<input type="checkbox"/>	7" CSG SIZE TOP=0' ; DEPTH=8552
FRONTIER	12,142		<input type="checkbox"/>	<input type="checkbox"/>	SACKS=924 TOC=8702'
DAKOTA	12,334		<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: RANDY NATVIG

Title: DRILLING MANAGER Date: 8/30/2011 Email: RNATVIG@LARAMIE-ENERGY.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>			
2517749	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	Rec'd top of the Mancos from operator.	6/15/2012 8:20:41 AM
Engineer	Emailed operator asking for the top and bottom of the Mancos formation, which is the formation they perforated, the top and bottom elevations area also missing on the Form 5A.	6/14/2012 8:28:14 AM
Permit	Dir sur, cmt summary and wellbore diagram being scanned. Operator would not give Mancos top.	9/28/2011 2:34:46 PM

Total: 3 comment(s)