

FORM  
5Rev  
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:

400314056

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: 75027

4. Contact Name: Stacey Owston

2. Name of Operator: ROSEWOOD RESOURCES INC

Phone: (970) 848-2228

3. Address: 2101 CEDAR SPRINGS RD STE 1500

Fax: (970) 848-2245

City: DALLAS State: TX Zip: 75201

5. API Number 05-125-11978-00

6. County: YUMA

7. Well Name: JP Brophy Federal

Well Number: 14-21 4N45W

8. Location: QtrQtr: SWSW Section: 21 Township: 4N Range: 45W Meridian: 6

Footage at surface: Distance: 795 feet Direction: FSL Distance: 853 feet Direction: FWL

As Drilled Latitude: 40.295715 As Drilled Longitude: -102.412022

## GPS Data:

Date of Measurement: 12/06/2011 PDOP Reading: 5.8 GPS Instrument Operator's Name: Dean Jarrett

\*\* 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: OLD BALDY

10. Field Number: 60630

11. Federal, Indian or State Lease Number: COC019832

12. Spud Date: (when the 1st bit hit the dirt) 10/25/2011 13. Date TD: 12/06/2011 14. Date Casing Set or D&amp;A: 12/07/2011

## 15. Well Classification:

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

16. Total Depth MD 2816 TVD\*\* 17 Plug Back Total Depth MD 2797 TVD\*\*

18. Elevations GR 3838 KB 3850

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, DIGLGR, CDCN

## 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	9+7/8	7	17	0	499	124		494	CALC
1ST	7+7/8	4+1/2	10.5	0	2,797	240	190	2,775	CALC

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____					
Method used	String	Cementing tool setting/perf 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	
NIOBRARA	100	2,771	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Please feel free to contact me with any questions.  
Thank you

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

Signed: \_\_\_\_\_ Print Name: Stacey Owston

Title: Administrative Assistant

Date:

Email: sowston@rosewd.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 checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400314077	LAS-	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)