

**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:

400283872

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: Tina Larreau  
2. Name of Operator: EAST CHEYENNE GAS STORAGE LLC Phone: (720) 351-4006  
3. Address: 10901 WEST TOLLER DRIVE - SUITE 200 Fax: (720) 351-4200  
City: LITTLETON State: CO Zip: 80127

5. API Number 05-075-07156-00 6. County: LOGAN  
7. Well Name: Kenneth Gillham Well Number: 3  
8. Location: QtrQtr: NESW Section: 6 Township: 11N Range: 52W Meridian: 6  
Footage at surface: Distance: 2300 feet Direction: FSL Distance: 2293 feet Direction: FWL  
As Drilled Latitude: 40.955480 As Drilled Longitude: -103.220650

## GPS Data:

Data of Measurement: 04/27/2010 PDOP Reading: 2.5 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: 6830011. Federal, Indian or State Lease Number: Fee12. Spud Date: (when the 1st bit hit the dirt) 06/11/1952 13. Date TD: \_\_\_\_\_ 14. Date Casing Set or D&A: \_\_\_\_\_

## 15. Well Classification:

☐ Dry ☐ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☒ Storage ☐ Observation16. Total Depth MD 5340 TVD\*\* \_\_\_\_\_ 17 Plug Back Total Depth MD 5246 TVD\*\* \_\_\_\_\_18. Elevations GR 4556 KB 4565

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:

Electronic logs are available from MJ Systems. East Cheyenne Gas Storage LLC is only a licenced user of the log data distributed by MJ Systems and can not distribute the log data. COGCC can obtain a copy of the electronic log from MJ Systems.

## 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	216	175	0	216	CALC
1ST	9+1/2	5+1/2	15.5	0	5,339	250	4,269	5,340	CALC

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: _____					
Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
SQUEEZE	1ST	560	749	175	3,204
SQUEEZE	1ST	1,400	259	175	1,283
SQUEEZE	1ST	2,240	50	2,240	2,400
SQUEEZE	1ST	2,490	200	2,400	2,750
SQUEEZE	1ST	3,826	700	3,450	3,830
Details of work:					
See attachments for service company cementing records.					

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	5,144		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	5,274		<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 ?			
<u>Attachment Checklist</u>					
400321024	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"/>
<u>Other Attachments</u>					
400283899	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400283910	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400324909	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400324945	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400324948	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)