

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:

400280512

Date Received:

05/04/2012

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

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 5358 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/perf depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	1,324	55	530	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: 5/4/2012 Email: gfrancis@mehllc.com

#### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
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"/>
<b>Other Attachments</b>			
400280512	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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
Permit	Off Hold. Received paper CBL.	9/27/2012 1:05:33 PM
Permit	On Hold. Input plug back depth. Waiting on paper CBL.	3/6/2012 2:03:51 PM
Permit	On Hold. Requested paper CBL and plug back depth.	3/6/2012 1:48:48 PM

Total: 3 comment(s)