

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:

400373423

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: 100122

4. Contact Name: Mike Cleary

2. Name of Operator: GUNNISON ENERGY CORPORATION

Phone: (303) 296-4222

3. Address: 1801 BROADWAY #1200

Fax: (303) 296-4555

City: DENVER State: CO Zip: 80202

5. API Number 05-029-06112-01

6. County: DELTA

7. Well Name: SPU COCKROFT 1294

Well Number: 23-41D H1R

8. Location: QtrQtr: TR 45 Section: 23 Township: 12S Range: 94W Meridian: 6

Footage at surface: Distance: 1184 feet Direction: FNL Distance: 1275 feet Direction: FEL

As Drilled Latitude: 38.999318 As Drilled Longitude: -107.858864

GPS Data:

Data of Measurement: 12/31/2012 PDOP Reading: 1.1 GPS Instrument Operator's Name: B. Baker UELS

** If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

** If directional footage at Bottom Hole Dist.: 1954 feet. Direction: FNL Dist.: 210 feet. Direction: FWL

Sec: 24 Twp: 12S Rng: 94W

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number: COC74442X

12. Spud Date: (when the 1st bit hit the dirt) 11/14/2012 13. Date TD: 11/29/2012 14. Date Casing Set or D&A: 12/05/2012

15. Well Classification:

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

16. Total Depth MD 8573 TVD** 7535 17 Plug Back Total Depth MD TVD**

18. Elevations GR 8536 KB 8560

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:

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	116	80	0	116	VISU
SURF	12+1/4	9+5/8	40	0	2,200	605	0	2,200	VISU
2ND	8+3/4	7	26	0	7,771	740	3,320	7,771	CBL

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	
ROLLINS	3,284	3,400	<input type="checkbox"/>	<input type="checkbox"/>	
COZZETTE	3,753	3,799	<input type="checkbox"/>	<input type="checkbox"/>	
CORCORAN	3,939	3,967	<input type="checkbox"/>	<input type="checkbox"/>	
MANCOS	3,967	12,400	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

With a current TD (as of 12/3/2012) at 8573', Gunnison Energy requested a second unplanned sidetrack of our SPU Cockroft 23-41D H1R (ST #1) well. On November 29, during a routine trip out of the hole, we lost part of a mud motor (approx 23') and bit (approx 1') in the hole at approximately 8546' (estimated top of fish). With the failure of the overshot to get to bottom and a limited success rate envisioned with the taper tap coupled with the fact that we were in volcanics at TD, it was decided to set a plug and go around the fish. COGCC permission was granted by Mr. Jay Krabacher on 12/10/2012.

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

Signed: _____

Print Name: Patty Johnson

Title: Operations Tech

Date: _____

Email: patty.johnson@oxbow.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400374839	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400374841	Directional Survey **	Yes	<input checked="" type="checkbox"/>	No	<input 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>					
400374838	CORRESPONDENCE	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400374842	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)