

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



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Document Number:

2237847

Date Received:

11/09/2012

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: 54380

4. Contact Name: DAVID M. BLANDFORD

2. Name of Operator: MATRIX ENERGY LLC

Phone: (970) 247-1959

3. Address: 1241 THOROUGHbred ROAD

Fax: (970) 247-2359

City: DURANGO State: CO Zip: 81303

5. API Number 05-123-35776-00

6. County: WELD

7. Well Name: HOLTON

Well Number: 31-12

8. Location: QtrQtr: NWNE Section: 12 Township: 6N Range: 65W Meridian: 6

Footage at surface: Distance: 660 feet Direction: FNL Distance: 1980 feet Direction: FEL

As Drilled Latitude: 40.505940 As Drilled Longitude: -104.608750

GPS Data:

Date of Measurement: 11/08/2012 PDOP Reading: 2.0 GPS Instrument Operator's Name: C. VANMATRE

** 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: WATTENBERG

10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 08/15/2012 13. Date TD: 08/18/2012 14. Date Casing Set or D&A: 08/19/2012

15. Well Classification:

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

16. Total Depth MD 7255 TVD** 17 Plug Back Total Depth MD 7215 TVD**

18. Elevations GR 4701 KB 4730

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:

DIL, FDC/CNL

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	12+1/4	8+5/8		0	655	510	0	650	CALC
1ST	7+7/8	4+1/2		0	7,240	472	2,970	7,240	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	
PARKMAN	3,664	3,708	<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,478	4,635	<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,015	5,100	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,739	7,004	<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,030	7,050	<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,054	7,070	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: _____ Print Name: DAVID M. BLANDFORD

Title: CO-MANAGER Date: 11/2/2012 Email: ANDELEENERGY@GMAIL.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2113940	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 type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
2237847	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>
Permit	More recent GPS data received.	2/19/2013 1:43:39 PM
Permit	Corrected surface casing depth to 655 per operator. New operator is Bayswater. GPS data will be rerun within 30 days.	2/14/2013 7:53:57 AM
Permit	On hold. GPS date is before spud date. Surface casing setting depth is 6560. Requested digital logs.	2/13/2013 1:08:53 PM

Total: 3 comment(s)