

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



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Document Number:

400445996

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: 10431  
2. Name of Operator: CHAMA OIL & MINERALS LLC  
3. Address: PO BOX 50203  
City: MIDLAND State: TX Zip: 79710  
4. Contact Name: WILLIAM HEARD  
Phone: (432) 683-8000  
Fax: (432) 683-8250

5. API Number 05-061-06881-01  
6. County: KIOWA  
7. Well Name: WEIMER STATE 16-19-47 Well Number: 1H  
8. Location: QtrQtr: NENE Section: 16 Township: 19S Range: 47W Meridian: 6  
Footage at surface: Distance: 600 feet Direction: FNL Distance: 660 feet Direction: FEL  
As Drilled Latitude: 38.409690 As Drilled Longitude: -102.677110

GPS Data:

Date of Measurement: 09/16/2012 PDOP Reading: 2.6 GPS Instrument Operator's Name: R GABRIEL

\*\* If directional footage at Top of Prod. Zone Dist.: 1415 feet. Direction: FNL Dist.: 660 feet. Direction: FEL

Sec: 16 Twp: 19S Rng: 47W

\*\* If directional footage at Bottom Hole Dist.: 1030 feet. Direction: FSL Dist.: 660 feet. Direction: FEL

Sec: 16 Twp: 19S Rng: 47W

9. Field Name: WILDCAT 10. Field Number: 99999  
11. Federal, Indian or State Lease Number: 1895.12

12. Spud Date: (when the 1st bit hit the dirt) 04/30/2013 13. Date TD: 06/09/2013 14. Date Casing Set or D&A: 06/11/2013

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 8580 TVD\*\* 5224 17 Plug Back Total Depth MD 5645 TVD\*\* 5191

18. Elevations GR 4107 KB 4123  
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:

NONE

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	9+5/8	36	0	508	340	0	508	VISU
1ST	8+3/4	7	26	0	5,745	500	3,838	5,745	CBL
OPEN HOLE	6+1/8			5745	8,580				

### STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 06/02/2013

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
STAGE TOOL	1ST	1,670	250	1,448	1,670

Details of work:

SET 7" AT 5745'. CEMENTED FIRST STAGE WITH 500 SX CLASS H AT 13.6 PPG, 1.44 CFS. 7" STAGE TOOL AT 1670'. OPENED STAGE TOOL AND CEMENTED WITH 250 SX CLASS H AT 13.6 PPG, 1.44 CFS. CLOSED STAGE TOOL.

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	
SPERGEN	5,745	8,580	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

DRILLED HORIZONTAL TO 8580'. DECISION MADE TO PB TO CASING, CUT WINDOW AND DRILL SIDETRACK ON DIFFERENT TARGET LINE (STILL IN SAME FORMATION - SPERGEN). SET CIBP IN 7" CASING AT 5645'. DID NOT RUN OPEN HOLE LOGS.

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

Signed: \_\_\_\_\_

Print Name: WILLIAM HEARD

Title: PROJECT DRILLING ENGINEER

Date: \_\_\_\_\_

Email: BILL.HEARD@CHAMAOIL.COM

#### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400446107	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"/>
<b>Other Attachments</b>			
400446086	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

#### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)