

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:

1535579

Date Received:

10/09/2013

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: 27480

4. Contact Name: ANNA STOTTS

2. Name of Operator: ENERGEN RESOURCES CORPORATION

Phone: (505) 325-6800

3. Address: 2010 AFTON PLACE

Fax: (505) 326-6112

City: FARMINGTON State: NM Zip: 87401

5. API Number 05-007-06308-00

6. County: ARCHULETA

7. Well Name: NAVAJO LAKE 32-5

Well Number: 21-2

8. Location: QtrQtr: NWNE Section: 20 Township: 32N Range: 5W Meridian: N

Footage at surface: Distance: 313 feet Direction: FNL Distance: 2478 feet Direction: FEL

As Drilled Latitude: 37.009950 As Drilled Longitude: -107.414780

GPS Data:

Data of Measurement: 03/30/2012 PDOP Reading: 2.1 GPS Instrument Operator's Name: SCOTT WIEBE

** If directional footage at Top of Prod. Zone Dist.: 2469 feet. Direction: FNL Dist.: 924 feet. Direction: FEL

Sec: 20 Twp: 32N Rng: 5W

** If directional footage at Bottom Hole Dist.: 823 feet. Direction: FSL Dist.: 1462 feet. Direction: FEL

Sec: 21 Twp: 32N Rng: 5W

9. Field Name: IGNACIO BLANCO

10. Field Number: 38300

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 12/13/2011 13. Date TD: 01/12/2012 14. Date Casing Set or D&A: 01/12/2012

15. Well Classification:

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

16. Total Depth MD 9416 TVD** 2618 17 Plug Back Total Depth MD 9349 TVD** 2620

18. Elevations GR 6139 KB 1

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:

CBL

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	17+1/2	13+3/8		0	442	540	0		
1ST	9+7/8	7+5/8		0	4,544	765	0		CBL
1ST LINER	6+3/4	4+1/2		4299	9,349				

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	
FRUITLAND COAL	4,265		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FORMATION LOG INTERVALS COMMENTS: 6 SPF - 28,752 HOLES - 0.5"

ELEVATION: KB: OPERATOR NOT ENTERED THIS FIELD WHICH CAUSED A FLAG - THEREFORE, "1" ENTERED FOR SUBMISSION.

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

Signed: _____

Print Name: ANNA STOTTS

Title: REGULATORY

Date: 4/5/2012

Email: ASTOTTS@ENERGEN.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
	CMT Summary *	Yes	<input type="checkbox"/>	No	<input checked="" 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>					
1535578	DEVIATED DRILLING PLAN	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
1535579	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Engineer	The APD was approved to set surface casing to a depth of 500'; however, the operator only set surface casing to 442'. A review of the surrounding water well depths (Selected Items Report) indicate the surface casing depth of 442' is adequate and the 7 5/8 production casing is cemented to surface.	2/20/2014 4:36:06 PM
Permit	Directional tool populated.	10/18/2013 8:37:57 AM
Permit	Laserfiche down. Need to put deviated drilling plan into the directional tool.	10/18/2013 6:34:18 AM
Data Entry	CHECK ELEVATION: KB: OPERATOR NOT ENTER - DATA ENTRY ENTERED "1" FOR SUBMISSION.	10/17/2013 9:59:37 AM

Total: 4 comment(s)