

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:

400562771

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: 10439 4. Contact Name: Cynthia Pinel
 2. Name of Operator: CARRIZO NIOBRARA LLC Phone: (713) 358-6210
 3. Address: 500 DALLAS STREET #2300 Fax: _____
 City: HOUSTON State: TX Zip: 77002

5. API Number 05-123-36995-00 6. County: WELD
 7. Well Name: Schneider Well Number: 1-14-8-60
 8. Location: QtrQtr: NWNW Section: 14 Township: 8N Range: 60W Meridian: 6
 Footage at surface: Distance: 240 feet Direction: FNL Distance: 1298 feet Direction: FWL
 As Drilled Latitude: 40.669100 As Drilled Longitude: -104.062680

GPS Data:

Date of Measurement: 11/04/2013 PDOP Reading: 3.0 GPS Instrument Operator's Name: Marc Woodard

** If directional footage at Top of Prod. Zone Dist.: 647 feet. Direction: FNL Dist.: 669 feet. Direction: FWL
 Sec: 14 Twp: 8N Rng: 60W

** If directional footage at Bottom Hole Dist.: 651 feet. Direction: FSL Dist.: 661 feet. Direction: FWL
 Sec: 14 Twp: 8N Rng: 60W

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

12. Spud Date: (when the 1st bit hit the dirt) 06/28/2013 13. Date TD: 07/07/2013 14. Date Casing Set or D&A: 06/29/2013

15. Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 10637 TVD** 6260 17 Plug Back Total Depth MD 10637 TVD** 6260

18. Elevations GR 4946 KB 4963 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:
MWD WITH GAMMA RAY

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	18	16	65	0	77	8	0	77	
SURF	12+1/4	9+5/8	36	0	1,430	567	0	1,430	
1ST	8+3/4	7	26	0	6,462	586	1,430	6,462	
1ST LINER	6+1/8	4+1/2	11.6	5651	10,637				

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	
SHARON SPRINGS	6,128	6,268	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
NIOBRARA	6,268		<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Comment:

Open Hole log was not ran in this well. The COGCC Log Submittal Policy had not yet been released at the time of this completion.

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

Signed: _____ Print Name: Cynthia Pinel

Title: Regulatory Comp. Analyst Date: _____ Email: cynthia.pinel@crzo.net

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400562803	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400562802	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 checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
400562787	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400562788	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400562790	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400562791	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400562794	LAS-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400562795	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400562801	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400562805	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)