

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



DE ET OE ES

Document Number:

400565852

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: 19160 4. Contact Name: Ali Savage
 2. Name of Operator: CONOCO PHILLIPS COMPANY Phone: (281) 2065359
 3. Address: P O BOX 2197 Fax: (281) 2065721
 City: HOUSTON State: TX Zip: 77252-

5. API Number 05-005-07209-00 6. County: ARAPAHOE
 7. Well Name: Tebo 29 Well Number: 2H
 8. Location: QtrQtr: SWNW Section: 28 Township: 4S Range: 64W Meridian: 6
 Footage at surface: Distance: 1981 feet Direction: FNL Distance: 250 feet Direction: FWL
 As Drilled Latitude: 39.675672 As Drilled Longitude: -104.564572

GPS Data:

Date of Measurement: 03/04/2014 PDOP Reading: 2.0 GPS Instrument Operator's Name: Dallas Nielsen

** If directional footage at Top of Prod. Zone Dist.: 1979 feet. Direction: FNL Dist.: 525 feet. Direction: FEL

Sec: 29 Twp: 4S Rng: 64W

** If directional footage at Bottom Hole Dist.: 1923 feet. Direction: FNL Dist.: 483 feet. Direction: FWL

Sec: 29 Twp: 4S Rng: 64W

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) 02/05/2014 13. Date TD: 02/19/2014 14. Date Casing Set or D&A: 02/21/2014

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 12436 TVD** 7883 17 Plug Back Total Depth MD 12430 TVD** 7883

18. Elevations GR 5838 KB 5863

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, LWD Curve, LWD Lateral, MUD

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	CMP	0	100	50	0	100	VISU
SURF	13+1/2	9+5/8	36	0	2,118	670	0	2,118	VISU
1ST	8+3/4	7	32	0	8,163	600	48	8,173	CBL
1ST LINER	6	4+1/2	13.5	7026	12,430	350	7,026	12,436	VISU

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	
SUSSEX	4,800		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,128		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	7,534	7,664	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,664		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: _____

Print Name: Ali Savage

Title: Regulatory Specialist

Date: _____

Email: ali.savage@conocophillips.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400565894	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400566181	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"/>
Other Attachments			
400567735	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400567739	LAS-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400567742	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400567753	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400567755	LAS-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400567756	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400570083	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400573076	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400575049	WELLBORE DIAGRAM	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)