

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:  
400585985

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

5. API Number 05-123-33956-00  
6. County: WELD  
7. Well Name: PERGAMOS  
Well Number: 2-4-44-7-60  
8. Location: QtrQtr: SESE Section: 4 Township: 7N Range: 60W Meridian: 6  
Footage at surface: Distance: 128 feet Direction: FSL Distance: 1322 feet Direction: FEL  
As Drilled Latitude: 40.597310 As Drilled Longitude: -104.093030

GPS Data:  
Date of Measurement: 08/03/2012 PDOP Reading: 2.3 GPS Instrument Operator's Name: Marc Woodard

\*\* If directional footage at Top of Prod. Zone Dist.: 725 feet. Direction: FNL Dist.: 658 feet. Direction: FEL  
Sec: 4 Twp: 7N Rng: 60W

\*\* If directional footage at Bottom Hole Dist.: 673 feet. Direction: FSL Dist.: 632 feet. Direction: FEL  
Sec: 4 Twp: 7N 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) 06/06/2012 13. Date TD: 06/17/2012 14. Date Casing Set or D&A: 06/06/2012

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

16. Total Depth MD 10750 TVD\*\* 6274 17 Plug Back Total Depth MD 10750 TVD\*\* 6274

18. Elevations GR 4910 KB 4927  
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	84	0	80	8	0	72	CALC
SURF	12+1/4	9+5/8	36	0	1,405	555	0	1,405	CALC
1ST	8+3/4	7	26	0	6,405	551	1,405	6,405	CALC
1ST LINER	6+1/8	4+1/2	11.6	5574	10,730				CALC

### 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	6,124	6,275	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
NIOBRARA	6,275		<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>			
400593769	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400593767	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>			
400593746	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400593747	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400593755	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400593756	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400593763	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400593766	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400593768	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)