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 **DRILLING COMPLETION REPORT**	Document Number: 400610998 Date Received: 06/19/2014

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: 10449
2. Name of Operator: TRITON ENERGY SERVICES LLC
3. Address: 2850 MCCLELLAND DRIVE STE 2400
   City: FORT COLLINS   State: CO   Zip: 80525

4. Contact Name: Clay Doke
   Phone: (720) 420-5700
   Fax:

5. API Number 05-123-37120-00
6. County: WELD
7. Well Name: TRITON   Well Number: 1
8. Location: QtrQtr: SWNW   Section: 23   Township: 4N   Range: 66W   Meridian: 6
   Footage at surface: Distance: 2418 feet Direction: FNL   Distance: 1164 feet Direction: FWL
   As Drilled Latitude: As Drilled Longitude:
   GPS Data:
   Data of Measurement: PDOP Reading: GPS Instrument Operator's Name:

   ** If directional footage at Top of Prod. Zone   Dist.:   feet. Direction: Dist.:   feet. Direction:
                                      Sec: Twp: Rng:
   ** If directional footage at Bottom Hole   Dist.:   feet. Direction: Dist.:   feet. Direction:
                                      Sec: Twp: Rng:

9. Field Name: WATTENBERG   10. Field Number: 90750
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 04/06/2014 13. Date TD: 04/25/2014 14. Date Casing Set or D&A: 04/26/2014

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

16. Total Depth MD 10705   TVD**   17 Plug Back Total Depth MD 10696   TVD**

18. Elevations GR 4729   KB 4746   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:

1. Caliper p
2. CBL pdf
3. Triple Combo pdf & las
4. Density.las

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	631	186	0	631	VISU
1ST	8+3/4	7+0/0	26	0	8,930	233	7,479	8,957	CALC
1ST LINER	6+1/8	4+1/2	12.7	8856	10,705				CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	7,479	1,042	0	7,479
1 INCH	SURF		20	0	631

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	
LYONS	8,924	9,069	☐	☐	
LOWER SATANKA	9,069	9,293	☐	☐	
WOLFCAMP	9,293	9,388	☐	☐	
AMAZON	9,388	9,435	☐	☐	
COUNCIL GROVE	9,435	9,520	☐	☐	
Admire	9,520	9,539	☐	☐	
VIRGIL	9,539	9,720	☐	☐	
FOUNTAIN	9,720	9,830	☐	☐	
MISSOURI	9,830	10,597	☐	☐	
MORROW	10,597	10,705	☐	☐	

Comment:

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

Signed: _____   Print Name: Paul Gottlob

Title: Regulatory & Engin. Tech.   Date: 6/19/2014   Email: paul.gottlob@iptenergyservices.com

Attachment Check List

Att Doc Num	Document Name	attached ?			

Attachment Checklist

Att Doc Num	Document Name	Yes		No	
400634462	CMT Summary *	Yes	☒	No	☐
	Core Analysis	Yes	☐	No	☒
	Directional Survey **	Yes	☐	No	☒
	DST Analysis	Yes	☐	No	☒
	Logs	Yes	☒	No	☐
	Other	Yes	☐	No	☒

Other Attachments

Att Doc Num	Document Name	Yes		No	
400634447	PDF-CEMENT BOND	Yes	☒	No	☐
400634449	LAS-DENSITY	Yes	☒	No	☐
400634450	PDF-TRIPLE COMBINATION	Yes	☒	No	☐
400634451	PDF-CALIPER	Yes	☒	No	☐
400634816	PDF-TRIPLE COMBINATION	Yes	☒	No	☐

General Comments

User Group	Comment	Comment Date
Permit	Returned to draft per operator's request.	6/26/2014 4:06:33 PM

Total: 1 comment(s)