

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:

400642815

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: 96340

4. Contact Name: Jack Fincham

2. Name of Operator: WIEPKING-FULLERTON ENERGY LLC

Phone: (303) 906-3335

3. Address: 4600 S DOWNING ST

Fax: (303) 761-9067

City: ENGLEWOOD State: CO Zip: 80113

5. API Number 05-073-06591-00

6. County: LINCOLN

7. Well Name: Ma-State

Well Number: # 8

8. Location: QtrQtr: SWNE Section: 24 Township: 10S Range: 56W Meridian: 6

Footage at surface: Distance: 1979 feet Direction: FNL Distance: 1865 feet Direction: FEL

As Drilled Latitude: 39.166080 As Drilled Longitude: -103.609820

## GPS Data:

Date of Measurement: 07/02/2014 PDOP Reading: 2.9 GPS Instrument Operator's Name: Elijah Frane

\*\* 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: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number: 9370.7

12. Spud Date: (when the 1st bit hit the dirt) 04/25/2014 13. Date TD: 05/30/2014 14. Date Casing Set or D&amp;A: 06/01/2014

## 15. Well Classification:

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

16. Total Depth MD 8075 TVD\*\* 17 Plug Back Total Depth MD 7475 TVD\*\*

18. Elevations GR 5268 KB 5281

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:

High Resolution Induction  
Compensated Density Compensated Neutron Gamma Ray  
Radial Cement Bond Log

## 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	8+5/8	24	0	323	265	0	323	VISU
1ST	7+7/8	5+1/2	17	0	8,055	317	0	8,035	CBL

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 06/04/2014

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
RETAINER	1ST	7,475	250	7,475	7,620
STAGE TOOL	1ST	4,797	250	3,400	4,797

Details of work:

6-3-2014 need to re-cement 1st string casing 7475' - 7620', perf 7550' - 7551'. Set cement retainer @ 7475'  
6-4 2014 rig up cementers pump 250 sks cement cover 7475' - 7620' good circulation.  
6-5-2014 set port collar 4797' pump 250 sks cement. Top of cement 3400' by CBL.

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	
NIOBRARA	3,200		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	3,755		<input type="checkbox"/>	<input type="checkbox"/>	
CEDAR HILLS	5,396		<input type="checkbox"/>	<input type="checkbox"/>	
LANSING	6,694		<input type="checkbox"/>	<input type="checkbox"/>	
TORCH	7,035	7,060	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	7,140	7,182	<input type="checkbox"/>	<input type="checkbox"/>	
OSAGE	7,900		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Ma-State # 8 well is a producing oil well from the Cherokee A formation.

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

Signed: \_\_\_\_\_ Print Name: Jack FinchamTitle: Agent Date: \_\_\_\_\_ Email: fincham4@msn.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400643334	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Directional Survey **	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400642953	DST Analysis	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Logs	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400643331	Other	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
<u>Other Attachments</u>					
400642881	LAS-IND-DENS-NEU	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400642928	PDF-INDUCTION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400642930	PDF-DENSITY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400643327	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400643328	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

## General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)