

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:
400629458

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: 26580 4. Contact Name: Ali Savage
 2. Name of Operator: BURLINGTON RESOURCES OIL & GAS LP Phone: (281) 2065359
 3. Address: PO BOX 4289 Fax: (281) 2065721
 City: FARMINGTON State: NM Zip: 87499

5. API Number 05-001-09779-00 6. County: ADAMS
 7. Well Name: Reserve 3-65 26 Well Number: 1H
 8. Location: QtrQtr: NWNW Section: 26 Township: 3S Range: 65W Meridian: 6
 Footage at surface: Distance: 660 feet Direction: FNL Distance: 400 feet Direction: FWL
 As Drilled Latitude: 39.767169 As Drilled Longitude: -104.639147

GPS Data:

Date of Measurement: 06/25/2014 PDOP Reading: 1.4 GPS Instrument Operator's Name: Dallas Nielsen

** If directional footage at Top of Prod. Zone Dist.: 675 feet. Direction: FNL Dist.: 1274 feet. Direction: FWL

Sec: 26 Twp: 3S Rng: 65W

** If directional footage at Bottom Hole Dist.: 732 feet. Direction: FNL Dist.: 484 feet. Direction: FEL

Sec: 26 Twp: 3S Rng: 65W

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) 06/03/2014 13. Date TD: 06/16/2014 14. Date Casing Set or D&A: 06/19/2014

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 11843 TVD** 7629 17 Plug Back Total Depth MD 11831 TVD** 7628

18. Elevations GR 5486 KB 5510

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, Mud, CBL

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+3/8	9+5/8	36	0	2,038	645	0	2,038	VISU
1ST LINER	8+3/4	5+1/2	23	0	11,831	1,525	2,470	11,843	CBL

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	
SHANNON	5,065		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	5,440		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	7,510		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,615		<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			
400640079	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400640087	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			
400640018	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400640020	LAS-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400640023	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400640024	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400640025	LAS-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400640028	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400640091	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400640497	PDF-CEMENT BOND	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)