

FORM  
5  
Rev  
09/14

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:  
400656465

Date Received:  
08/05/2014

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

OGCC Operator Number: 6720 Contact Name: JOHN THOMAS  
Name of Operator: BAYLESS PRODUCER, LLC\* ROBERT L Phone: (505) 3262659  
Address: P O BOX 168 Fax: (505) 3266911  
City: FARMINGTON State: NM Zip: 87499

API Number 05-081-05169-00 County: MOFFAT  
Well Name: GOV'T-POHLMAN Well Number: 1  
Location: QtrQtr: NWNW Section: 15 Township: 4N Range: 91W Meridian: 6  
Footage at surface: Distance: 225 feet Direction: FNL Distance: 260 feet Direction: FWL  
As Drilled Latitude: \_\_\_\_\_ As Drilled Longitude: \_\_\_\_\_

GPS Data:  
Date 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: \_\_\_\_\_

Field Name: MOFFAT Field Number: 55700  
Federal, Indian or State Lease Number: 37924

Spud Date: (when the 1st bit hit the dirt) 09/11/1926 Date TD: 02/12/1927 Date Casing Set or D&A: 06/11/2014  
Rig Release Date: \_\_\_\_\_ \*for Multi-Well Location ONLY

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

Total Depth MD 4128 TVD\*\* \_\_\_\_\_ Plug Back Total Depth MD 3161 TVD\*\* \_\_\_\_\_  
Elevations GR 6985 KB 6988 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:

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		20		0	10				CALC
SURF	12+1/2	10+3/4	40.5	0	423	200	60	423	CALC
1ST	10	7	20	0	2,476	50	1,888	2,476	CALC
2ND		5+1/2	15.5	0	2,150	315	470	2,150	CBL
1ST LINER		5+1/2		2169	3,140	0			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:

Formation log intervals and test zones:

**FORMATION LOG INTERVALS AND TEST ZONES**

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
MANCOS	0				

Comment:

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

Signed: \_\_\_\_\_ Print Name: JOHN THOMAS

Title: OPERATIONS ENGINEER Date: 8/5/2014 Email: JTHOMAS@RLBAYLESS.COM

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b><u>Attachment Checklist</u></b>			
400656502	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"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400656504	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<b><u>Other Attachments</u></b>			
400646163	OPERATIONS SUMMARY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400646164	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400656465	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400656482	CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

## General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Passes Permitting. Cable tool hole so removed directional info and TVDs.	9/25/2014 1:42:12 PM
Engineer	Changed Well Classification from "Dry Hole" to "Oil Well." Changed "First Liner" to "Second String," which extends to surface and was installed as a remedial measure to isolate 7" First String casing leaks found from 924' to 1,833'. Changed the 5+1/2" "Second Liner" to "First Liner," because it is hanging off the First String (7" casing). Added casing weights shown on the wellbore diagram for Surface String, First String, and Second String. Added Conductor setting depth, changed Surface String sacks of cement, and changed 5+1/2" Liner cement verification from CBL to CALC (operator suspects that string is uncemented), per the wellbore diagram. Changed Second String sacks of cement from 58 to 315, as shown on the 6/11/2014 cement ticket, Document No. 400656502 (attached to this Form 5). Changed Second String top of cement from 200' to 470', per first significant and consistent amplitude deflection on 6/12/2014 CBL, Document No. 400656482 (attached to this Form 5). Removed Mancos Formation bottom depth of 3140' and changed it to a null value. Mancos shale appears to extend below a depth of 3140' on the Electrical Log for this well, Document No. 944447.	9/25/2014 11:42:34 AM

Total: 2 comment(s)