

FORM  
5Rev  
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



DE ET OE ES

Document Number:

400704119

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

OGCC Operator Number: 96340

Contact Name: Jack Fincham

Name of Operator: WIEPKING-FULLERTON ENERGY LLC

Phone: (303) 906-3335

Address: 4600 S DOWNING ST

Fax: (303) 761-9067

City: ENGLEWOOD State: CO Zip: 80113

API Number 05-073-06576-00

County: LINCOLN

Well Name: Big Wampum

Well Number: # 3

Location: QtrQtr: NENE Section: 23 Township: 10S Range: 56W Meridian: 6

Footage at surface: Distance: 760 feet Direction: FNL Distance: 660 feet Direction: FEL

As Drilled Latitude: 39.169490 As Drilled Longitude: -103.624250

## GPS Data:

Date of Measurement: 09/19/2014 PDOP Reading: 2.6 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:

Field Name: GREAT PLAINS

Field Number: 32756

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/25/2014 Date TD: 08/22/2014 Date Casing Set or D&amp;A: 08/27/2014

Rig Release Date: 08/27/2014 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 8100 TVD\*\* Plug Back Total Depth MD 8028 TVD\*\*

Elevations GR 5329 KB 5342 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

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

## CASING, LINER AND CEMENT

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	340	165	0	340	VISU
1ST	7+7/8	5+1/2	17	0	8,080	428	6,180	8,080	CBL

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
STAGE TOOL	1ST	4,851	250	2,970	4,851

Details of work:

Set Port Collar @ 4851' pump 250 sks cement top of cement 2970' by CBL

### **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	
NIOBRARA	3,295				
CODELL	3,850				
CEDAR HILLS	5,480				
LANSING	6,783				
TORCH	7,116				
PAWNEE A	7,134				
CHEROKEE	7,222	7,262	YES		
OSAGE	7,964	7,969	NO		

Comment:

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

Signed: \_\_\_\_\_

Print Name: Jack Fincham

Title: Agent

Date: \_\_\_\_\_

Email: fincham4@msn.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400704792	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"/>
400705774	DST Analysis	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400704794	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<u>Other Attachments</u>			
400704332	PDF-INDUCTION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400704335	PDF-DENSITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400704339	LAS-IND-DENS-NEU	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400704346	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400704837	WELL LOCATION PLAT	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)