

**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



Document Number:

400710945

Date Received:

10/20/2014

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

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 05-073-06644-00

County: LINCOLN

Well Name: Ma-State

Well Number: # 16

Location: QtrQtr: NENW Section: 24 Township: 10S Range: 56W Meridian: 6

Footage at surface: Distance: 660 feet Direction: FNL Distance: 2080 feet Direction: FWL

As Drilled Latitude: 39.169730 As Drilled Longitude: -103.614580

GPS Data:

Date of Measurement: 10/13/2014 PDOP Reading: 2.1 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: 9370.7

Spud Date: (when the 1st bit hit the dirt) 08/22/2014 Date TD: 09/16/2014 Date Casing Set or D&A: 09/18/2014

Rig Release Date: 09/19/2014 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 8013 TVD** Plug Back Total Depth MD 7965 TVD**

Elevations GR 5278 KB 5291 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	305	165	0	305	VISU
1ST	7+7/8	5+1/2	17	0	7,996	350	5,004	7,996	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
RETAINER	S.C. 1.1	7,810	350	7,810	7,944
RETAINER	S.C. 1.2	7,390	250	7,390	7,500
STAGE TOOL	1ST	4,762	250	3,100	4,762

Details of work:

9-24-2014 run bond log 7953' - 7700'. Poor cement from 7924' - 7944'. Perf squeeze holes @ 7900', set cement retainer 7810' pump 350 sks cement cover 7810' - 7950'
9-26-2014 run bond log 7810' - 7200'. Poor cement @ 7500'. Perf squeeze holes 7460'. Set cement retainer 7390' pump 250 sks cement cover 7390' - 7500'.
9-29-2014 set port collar @ 4762' pump 250 sks cement. Top of cement port collar 3100 by CBL
10-1-2014 run 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	3,238				
CODELL	3,783				
CEDAR HILLS	5,429				
LANSING	6,720				
PAWNEE A	7,090				
CHEROKEE	7,164	7,200	YES		
OSAGE	7,916	7,936	YES		

Operator Comments

Operator of Ma-State # 16 well is currently conducting productive testing of Morrow formation with natural gas flair to determine economic value, due to gas with rich nitrogen content and no gas line near well location. Gas Analysis attached shows no hydrogen. Production casing had poor cement job that required two retainer cement jobs @ 7460' and 7900'. After cement ran CBL that shows coverage.

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: 10/20/2014 Email: fincham4@msn.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400711046	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"/>
400711117	DST Analysis	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711054	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<u>Other Attachments</u>			
400710945	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400710999	LAS-IND-DENS-NEU	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711005	PDF-INDUCTION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711013	PDF-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711023	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711621	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711631	WELLBORE DIAGRAM	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)