

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:
400756430

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 05-073-06644-00 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:
Logs submitted with Preliminary Form 5 document # 400710945

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	5,000	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	250	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:

9-24-2-2014 run bond log 7953' - 7700'. Poor cement from 7924' - 7944'. Perf squeeze holes @ 7900'. set cement retainer 7810' pump 350 sks cement cover 7810' - 7844'
 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

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				
MARMATON	7,041				
PAWNEE A	7,090				
CHEROKEE	7,164	7,200	YES		
MORROW V-11	7,752	7,761	NO		
OSAGE	7,916	7,936	YES		

Comment:

Ma-State # 16 well is a shut in natural gas well. With perfs 7753' - 7761' in the Morrow V-11 formation. No natural gas pipeline near well to market production. Refer to Preliminary Form 5 completion document # 400710945 for attachments.

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>			
	CMT Summary *	Yes <input type="checkbox"/>	No <input checked="" 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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)