

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



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Document Number:

400768524

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: 10500

Contact Name: Neyeska Mut

Name of Operator: COACHMAN ENERGY OPERATING COMPANY LLC

Phone: (303) 296-3535

Address: 5251 DTC PARKWAY SUITE 200

Fax: (303) 296-3888

City: GREENWOOD State: CO Zip: 80111

API Number 05-045-22455-00

County: GARFIELD

Well Name: Federal

Well Number: 14/15-3-21

Location: QtrQtr: SENE Section: 21 Township: 6S Range: 91W Meridian: 6

Footage at surface: Distance: 2337 feet Direction: FNL Distance: 743 feet Direction: FEL

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.: 832 feet. Direction: FNL Dist.: 705 feet. Direction: FEL

Sec: 21 Twp: 6S Rng: 91W

** If directional footage at Bottom Hole Dist.: 768 feet. Direction: FNL Dist.: 711 feet. Direction: FEL

Sec: 21 Twp: 6S Rng: 91W

Field Name: KOKOPELLI

Field Number: 47525

Federal, Indian or State Lease Number: COC-066370

Spud Date: (when the 1st bit hit the dirt) 11/02/2014 Date TD: 11/11/2014 Date Casing Set or D&A: 11/13/2014

Rig Release Date: Per Rule 308A.b.

Well Classification:

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

Total Depth MD 8154 TVD** 7838 Plug Back Total Depth MD 8081 TVD** 7765

Elevations GR 6933 KB 6955 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

Temperature Survey. No open hole logs run, attempted to run open hole logs but logs stopped at 3510'.

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
CONDUCTOR	30+0/0	20+0/0	53	0	120	350	0	120	CALC
SURF	13+1/2	6+5/8	36	0	1,520	385	0	1,520	CALC
1ST	8+3/4	4+1/2	11.6	0	8,120	1,550	2,400	8,120	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 NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WASATCH	0	4,840	NO	NO	
WILLIAMS FORK	4,840	8,033	NO	NO	
ROLLINS	8,033		NO	NO	Well TD is 8154. TD appears to be in the Rollins. Top of gas was noted at 5367'.

Comment:

The drilling rig is still on this well pad drilling wells. It is not anticipated to finish drilling the well sequence until late January 2015. The well is planned to be completed (fracking) in early 2015 pending CPW big game timing limitations. No open hole logs were run, no cores were cut, and no DSTs were conducted. The cement top depth for the production string was estimated from the Temperature Survey. A CBL will be run at a later date after the well has been fracked.

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

Signed: _____

Print Name: Rick ObernolteTitle: Agent

Date: _____

Email: rickobe1@aol.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400768531	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400768530	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"/>
<u>Other Attachments</u>		
400768527	PDF-TEMPERATURE	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400768528	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400768529	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)