

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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| DE | ET | OE | ES |
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Document Number:

400824806

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: 10439

Contact Name: CYNTHIA PINEL

Name of Operator: CARRIZO NIOBRARA LLC

Phone: (713) 358-6210

Address: 500 DALLAS STREET #2300

Fax:

City: HOUSTON

State: TX

Zip: 77002

API Number 05-123-40454-00

County: WELD

Well Name: TIMBRO RANCH

Well Number: 2-3-9-59

Location: QtrQtr: 2 Section: 3 Township: 9N Range: 59W Meridian: 6

Footage at surface: Distance: 316 feet Direction: FNL Distance: 2329 feet Direction: FEL

As Drilled Latitude: 40.786230 As Drilled Longitude: -103.963370

GPS Data:

Date of Measurement: 10/03/2014 PDOP Reading: 1.3 GPS Instrument Operator's Name: ERIC PURCELL

** If directional footage at Top of Prod. Zone Dist.: 600 feet. Direction: FNL Dist.: 2450 feet. Direction: FEL

Sec: 3 Twp: 9N Rng: 59W

** If directional footage at Bottom Hole Dist.: 600 feet. Direction: FSL Dist.: 2475 feet. Direction: FEL

Sec: 3 Twp: 9N Rng: 59W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 12/16/2014 Date TD: 12/24/2014 Date Casing Set or D&A: 12/21/2014

Rig Release Date: 12/27/2015 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 10553 TVD** 6220 Plug Back Total Depth MD 10553 TVD** 6220

Elevations GR 5066 KB 5083 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL WITH GAMMA RAY, MWD WITH GAMMA RAY, COMPENSATED NEUTRON

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 | 18 | 16 | 42.05 | 0 | 76 | 8 | 0 | 77 | VISU |
| SURF | 12+1/4 | 9+5/8 | 36 | 0 | 1,820 | 670 | 0 | 1,820 | VISU |
| 1ST | 8+3/4 | 7 | 23 | 0 | 6,421 | 408 | 1,750 | 6,421 | VISU |
| 2ND | 6+1/8 | 4+1/2 | 11.6 | 0 | 10,507 | | | | |

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 | |
| SHARON SPRINGS | 6,120 | 6,196 | NO | NO | |
| NIOBRARA | 6,196 | | NO | | |

Comment:

THIS WELL HAS NOT YET BEEN FRAC'D. THIS WELL IS PART OF A MULTI-WELL PAD. AN ALTERNATE LOG WAS RAN ON THIS WELL AS ALLOWED PER RULE 317.P EXCEPTION REQUEST.

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

Signed: _____

Print Name: CYNTHIA PINEL

Title: REGULATORY COMP. ANALYST Date: _____ Email: CYNTHIA.PINEL@CRZO.NET

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|--|---|--|
| <u>Attachment Checklist</u> | | | |
| 400825470 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 400825469 | 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> | | | |
| 400825456 | PDF-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400825457 | PDF-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400825458 | PDF-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400825459 | PDF-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400825460 | PDF-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400825461 | PDF-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400825462 | LAS-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400825463 | LAS-GAMMA RAY | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400825467 | PDF-GAMMA RAY | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400825472 | DIRECTIONAL DATA | 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)