

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:

400825551

Date Received:

04/15/2015

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: 95960 Contact Name: Jeff Bluemel  
Name of Operator: WEXPRO COMPANY Phone: (307) 352-7593  
Address: P O BOX 45003 Fax: (307) 352-7575  
City: SALT LAKE CITY State: UT Zip: 84145-

API Number 05-081-07424-00 County: MOFFAT  
Well Name: J C DONNELL Well Number: 16  
Location: QtrQtr: SWNW Section: 29 Township: 12N Range: 97W Meridian: 6  
Footage at surface: Distance: 2324 feet Direction: FNL Distance: 1321 feet Direction: FWL  
As Drilled Latitude: 40.972161 As Drilled Longitude: -108.320714

GPS Data:  
Date of Measurement: 05/01/2007 PDOP Reading: 2.5 GPS Instrument Operator's Name: N. Hellis

\*\* 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: POWDER WASH Field Number: 69800  
Federal, Indian or State Lease Number: COD039907B

Spud Date: (when the 1st bit hit the dirt) 04/22/2008 Date TD: 05/13/2008 Date Casing Set or D&A: 05/14/2008  
Rig Release Date: 05/15/2008 Per Rule 308A.b.

Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

Total Depth MD 8967 TVD\*\* Plug Back Total Depth MD 8929 TVD\*\*

Elevations GR 6586 KB 6599 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:  
CBL Attached

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	24	20		0	60		0	60	VISU
SURF	12+1/4	9+5/8	36	0	470	250	0	470	VISU
1ST	7+7/8	4+1/2	13.5	0	8,966	1,110	0	8,966	CBL

**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	13	5,200	NO	NO	
FORT UNION	5,200	8,967	NO	NO	

Operator Comments

This Form 5 is being submitted only for the purpose of submitted the log file per conversation with Don Sharp.

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

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

Print Name: Jeff Bluemel

Title: Sr. Engineering Tech

Date: 4/15/2015

Email: jeffery.bluemel@questar.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b><u>Attachment Checklist</u></b>			
	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 checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b><u>Other Attachments</u></b>			
400825551	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400825552	TIF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400825559	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	Elevation adjusted as per plat, open-hole logs, mud log. Directional footages deleted; vertical well; same as surface hole location.	4/22/2015 10:04:57 AM
Permit	Passes Permitting: This Form 5 submitted at COGCC request for sole purpose of transmitting CBL log.	4/15/2015 9:41:46 AM

Total: 2 comment(s)