

**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:

400840106

Date Received:

06/08/2015

**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: 10447

Contact Name: JENNIFER LIND

Name of Operator: URSA OPERATING COMPANY LLC

Phone: (720) 508-8362

Address: 1050 17TH STREET #2400

Fax:

City: DENVER State: CO Zip: 80265

API Number 05-045-22772-00

County: GARFIELD

Well Name: YATER

Well Number: 12C-17-07-95

Location: QtrQtr: NWSW Section: 17 Township: 7S Range: 95W Meridian: 6

Footage at surface: Distance: 1754 feet Direction: FSL Distance: 1106 feet Direction: FWL

As Drilled Latitude: 39.435261 As Drilled Longitude: -108.026478

## GPS Data:

Date of Measurement: 05/12/2015 PDOP Reading: 1.5 GPS Instrument Operator's Name: AIBNER

\*\* If directional footage at Top of Prod. Zone Dist.: 2046 feet Direction: FNL Dist.: 626 feet Direction: FWL

Sec: 17 Twp: 7S Rng: 95W

\*\* If directional footage at Bottom Hole Dist.: 2046 feet Direction: FNL Dist.: 626 feet Direction: FWL

Sec: 17 Twp: 7S Rng: 95W

Field Name: PARACHUTE

Field Number: 67350

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 02/08/2015 Date TD: 03/13/2015 Date Casing Set or D&amp;A: 03/13/2015

Rig Release Date: 03/14/2015 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 6969 TVD\*\* 6635 Plug Back Total Depth MD 6907 TVD\*\* 6573

Elevations GR 5519 KB 5536 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

CBL, MUD, PULSED NEUTRON. OPEN HOLE LOGS WERE RAN FOR THIS PAD ON THE YATER 12D-17-07-95 WELL (API # 05-045-22761).

**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	16	75	0	77	70	0	77	VISU
SURF	12+1/4	8+5/8	32	0	1,799	420	0	1,799	VISU
1ST	7+7/8	4+1/2	11.6	0	6,954	845	1,665	6,954	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:

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### 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	
WILLIAMS FORK	3,749		NO	NO	
CAMEO	6,228		NO	NO	
ROLLINS	6,739		NO	NO	

#### Operator Comments

LAT / LONGS PROVIDED IN THE WELL INFORMATION SECTION ARE ACTUAL, AS-DRILLED COORDINATES. AS-DRILLED PLAT IS ATTACHED FOR YOUR REFERENCE.

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

Signed: \_\_\_\_\_ Print Name: JENNIFER LIND

Title: REGULATORY ANALYST Date: 6/8/2015 Email: JLIND@URSARESOURCES.COM

### Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400849888	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400847682	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>		
400840106	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400847684	PLAT	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400847685	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400847686	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400847687	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400849883	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400849885	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Passes Permitting.	8/13/2015 2:41:07 PM

Total: 1 comment(s)