

**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:

400840105

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 05-045-22753-00 County: GARFIELD  
Well Name: YATER Well Number: 22C-17-07-95  
Location: QtrQtr: NWSW Section: 17 Township: 7S Range: 95W Meridian: 6  
Footage at surface: Distance: 1767 feet Direction: FSL Distance: 1106 feet Direction: FWL  
As Drilled Latitude: 39.435296 As Drilled Longitude: -108.026479

## 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.: 2188 feet Direction: FNL Dist.: 1967 feet Direction: FWLSec: 17 Twp: 7S Rng: 95W\*\* If directional footage at Bottom Hole Dist.: 2188 feet Direction: FNL Dist.: 1967 feet Direction: FWLSec: 17 Twp: 7S Rng: 95WField Name: PARACHUTE Field Number: 67350

Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 02/06/2015 Date TD: 03/10/2015 Date Casing Set or D&A: 03/10/2015Rig Release Date: 03/11/2015 Per Rule 308A.b.

## Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ ObservationTotal Depth MD 6960 TVD\*\* 6619 Plug Back Total Depth MD 6897 TVD\*\* 6556Elevations 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	1,801	420	0	1,801	VISU
1ST	7+7/8	4+1/2	11.6	0	6,942	835	1,320	6,942	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	
WILLIAMS FORK	3,786		NO	NO	
CAMEO	6,264		NO	NO	
ROLLINS	6,775		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>			
400849866	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400847704	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>			
400840105	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400847609	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400847613	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400847626	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400847705	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400849868	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400849871	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 1:53:06 PM

Total: 1 comment(s)