

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



DE ET OE ES

Document Number:
400850921

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: 10433 Contact Name: MEL LACKIE
Name of Operator: PICEANCE ENERGY LLC Phone: (303) 339-4400
Address: 1512 LARIMER STREET #1000 Fax: (303) 339-4399
City: DENVER State: CO Zip: 80202

API Number 05-077-10230-00 County: MESA
Well Name: Gunderson Well Number: 29-14E
Location: QtrQtr: SENE Section: 29 Township: 9S Range: 93W Meridian: 6
Footage at surface: Distance: 2407 feet Direction: FNL Distance: 1168 feet Direction: FEL
As Drilled Latitude: 39.248803 As Drilled Longitude: -107.787903

GPS Data:
Date of Measurement: 07/25/2014 PDOP Reading: 1.0 GPS Instrument Operator's Name: ERIC PURCELL

** If directional footage at Top of Prod. Zone Dist.: 1882 feet. Direction: FSL Dist.: 865 feet. Direction: FEL
Sec: 29 Twp: 9S Rng: 93W
** If directional footage at Bottom Hole Dist.: 1882 feet. Direction: FSL Dist.: 865 feet. Direction: FEL
Sec: 29 Twp: 9S Rng: 93W

Field Name: BUZZARD CREEK Field Number: 9500
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 04/30/2015 Date TD: 05/04/2015 Date Casing Set or D&A: 05/04/2015
Rig Release Date: 05/04/2015 Per Rule 308A.b.

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

Total Depth MD 7815 TVD** 7712 Plug Back Total Depth MD 7715 TVD** 7612

Elevations GR 7531 KB 7553 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
MUD (PASON), PULSED NEUTRON, CBL

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	42	0	82	27	0	82	CALC
SURF	12+1/4	8+5/8	24	0	1,538	306	0	1,538	CALC
1ST	7+7/8	4+1/2	11.6	0	7,805	1,311	1,560	7,805	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	4,581				
CAMEO	6,963				
ROLLINS	7,541				

Comment:

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

Signed: _____

Print Name: MEL LACKIE

Title: ENGINEERING TECHNICIAN

Date: _____

Email: mlackie@laramie-energy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400876452	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400887724	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"/>
Other Attachments			
400872237	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400876436	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400876441	PDF-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400876443	LAS-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400876445	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400887703	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400887704	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400887723	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)