

FORM
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Rev
10/14

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:

400906314

Date Received:

09/28/2015

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/or 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: 10439 Contact Name: Madelon Raney
Name of Operator: CARRIZO NIOBRARA LLC Phone: (713) 358-6218
Address: 500 DALLAS STREET #2300 Fax:
City: HOUSTON State: TX Zip: 77002 Email: madelon.raney@crzo.net

API Number 05-123-37244-00 County: WELD
Well Name: Shull Well Number: 3-25-9-60
Location: QtrQtr: SWSE Section: 25 Township: 9N Range: 60W Meridian: 6
Footage at surface: Distance: 266 feet Direction: FSL Distance: 1339 feet Direction: FEL
As Drilled Latitude: 40.714690 As Drilled Longitude: -104.035170

GPS Data:
Date of Measurement: 10/31/2013 PDOP Reading: 1.9 GPS Instrument Operator's Name: George Allen

** If directional footage at Top of Prod. Zone Dist: 676 feet Direction: FSL Dist: 1953 feet Direction: FEL
Sec: 25 Twp: 9N Rng: 60W

** If directional footage at Bottom Hole Dist: 652 feet Direction: FNL Dist: 1971 feet Direction: FEL
Sec: 25 Twp: 9N Rng: 60W

Field Name: DJ HORIZONTAL NIOBRARA Field Number: 16950

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 06/16/2013 Date TD: 07/06/2013 Date Casing Set or D&A: 07/02/2013
Rig Release Date: 02/13/2015 Per Rule 308A.b.

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

Total Depth MD 10565 TVD** 6232 Plug Back Total Depth MD 10565 TVD** 6232

Elevations GR 4943 KB 17 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
MWD Log and Cement Bond Log

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	39.6	0	60	8	0	60	CALC
SURF	12+1/4	9+5/8	36	0	1,436	646	0	1,436	CALC
1ST	8+3/4	7	23	0	6,277	552	1,400	6,277	CBL
1ST LINER	6+1/8	4+1/2	11.6	5533	10,565				CALC

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	
PIERRE	509	6,158	NO	NO	THIS FORMATION IS ESTIMATED ONLY
PARKMAN	3,471	3,821	NO	NO	THIS FORMATION IS ESTIMATED ONLY
SUSSEX	4,046	4,352	NO	NO	THIS FORMATION IS ESTIMATED ONLY
SHARON SPRINGS	6,028	6,158	NO	NO	
NIOBRARA	6,158	10,565	NO	NO	

Operator Comments:

No Open Hole Log was ran. Surface hole was surveyed at conductor. Form 10 was filed under Document #400904155

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

Signed: _____ Print Name: MADELON RANEY

Title: REGULATORY COMPL. ANALYST Date: 9/28/2015 Email: madelon.raney@crzo.net

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400906373	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input 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"/>
<u>Other Attachments</u>			
400906355	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400906356	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400906358	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400906375	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400906379	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)