

FORM
5Rev
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:

400927862

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: 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

API Number 05-123-37554-00

County: WELD

Well Name: Nelson Ranches

Well Number: 1-27-10-59

Location: QtrQtr: SENE Section: 28 Township: 10N Range: 59W Meridian: 6

Footage at surface: Distance: 2219 feet Direction: FNL Distance: 193 feet Direction: FEL

As Drilled Latitude: 40.810060 As Drilled Longitude: -103.975660

GPS Data:

Date of Measurement: 11/04/2013 PDOP Reading: 2.1 GPS Instrument Operator's Name: Jim Grabowski

** If directional footage at Top of Prod. Zone Dist.: 1869 feet. Direction: FNL Dist.: 523 feet. Direction: FEL

Sec: 28 Twp: 10N Rng: 59W

** If directional footage at Bottom Hole Dist.: 1894 feet. Direction: FNL Dist.: 650 feet. Direction: FEL

Sec: 27 Twp: 10N Rng: 59W

Field Name: DJ HORIZONTAL NIOBRARA

Field Number: 16950

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/27/2013 Date TD: 08/06/2013 Date Casing Set or D&A: 07/13/2013

Rig Release Date: 10/27/2014 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 11607 TVD** 6326 Plug Back Total Depth MD 11607 TVD** 6326

Elevations GR 5167 KB 5184 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

MWD Log and 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	36.9	0	60	6	0	60	VISU
SURF	12+1/4	9+5/8	36	0	1,438	546	0	1,438	VISU
1ST	8+3/4	7	23	0	6,383	584	1,202	6,383	CBL
1ST LINER	6+1/8	4+1/2	11.6	5694	11,592				

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	522		NO	NO	ESTIMATED
PARKMAN	3,775	4,013	NO	NO	ESTIMATED
SUSSEX	4,317	4,592	NO	NO	ESTIMATED
SHARON SPRINGS	6,196	6,270	NO	NO	
NIOBRARA	6,270	11,607	NO	NO	

Comment:

OPEN HOLE LOG WAS NOT RAN ON THIS WELL. FORM 10 WAS FILED UNDER DOCUMENT #400915028

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: _____

Email: madelon.raney@crzo.net

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400927907	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400927904	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>		
400927898	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400927899	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400927900	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400927923	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)