

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:

400926924

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: CAROL PRUITT

Name of Operator: CARRIZO NIOBRARA LLC

Phone: (713) 328-1000

Address: 500 DALLAS STREET #2300

Fax: (713) 328-1060

City: HOUSTON State: TX Zip: 77002

API Number 05-123-37742-00

County: WELD

Well Name: Bob White

Well Number: 3-36-8-62

Location: QtrQtr: SWSW Section: 36 Township: 8N Range: 62W Meridian: 6

Footage at surface: Distance: 282 feet Direction: FSL Distance: 842 feet Direction: FWL

As Drilled Latitude: 40.611090 As Drilled Longitude: -104.275060

GPS Data:

Date of Measurement: 11/04/2013 PDOP Reading: 1.8 GPS Instrument Operator's Name: MARC WOODARD

** If directional footage at Top of Prod. Zone Dist.: 348 feet. Direction: FSL Dist.: 1097 feet. Direction: FWL

Sec: 36 Twp: 8N Rng: 62W

** If directional footage at Bottom Hole Dist.: 651 feet. Direction: FNL Dist.: 1115 feet. Direction: FWL

Sec: 36 Twp: 8N Rng: 62W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number: 3756605

Spud Date: (when the 1st bit hit the dirt) 08/11/2013 Date TD: 08/31/2013 Date Casing Set or D&A: 08/27/2012

Rig Release Date: 09/10/2013 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 11082 TVD** 6623 Plug Back Total Depth MD 11082 TVD** 6623

Elevations GR 4939 KB 4956 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

MWD W/ GAMMA RAY

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	55	8	0	55	VISU
SURF	12+1/4	9+5/8	36	0	1,446	646	0	1,446	VISU
1ST	8+3/4	7	23	0	6,625	591	900	6,625	CBL
1ST LINER	6+1/8	4+1/2	11.6	5293	10,422				

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	
SHARON SPRINGS	6,380	6,521	NO	NO	
NIOBRARA	6,521	11,082	NO	NO	

Comment:

NO ADDITIONAL FORMATIONS RECORDED. NO OPEN HOLE LOG RUN. COGCC LOG SUBMITTAL POLICY NOT YET RELEASED AT THE TIME THIS WELL WAS DRILLED. FORM 10 SUBMITTED, DOC NO. 400928619

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

Signed: _____

Print Name: CAROL PRUITT

Title: REGULATORY COMPLIANCE

Date: _____

Email: CAROL.PRUITT@CRZO.NET

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400926975	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400926974	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>		
400926937	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400926940	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400926941	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400929157	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)