

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:

400934581

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: Jeff Annable

Name of Operator: CARRIZO NIOBRARA LLC

Phone: (303) 928-7128

Address: 500 DALLAS STREET #2300

Fax: (303) 218-5678

City: HOUSTON State: TX Zip: 77002

API Number 05-123-38332-00

County: WELD

Well Name: SPEAKER

Well Number: 2-27-8-61

Location: QtrQtr: NWNW Section: 27 Township: 8N Range: 61W Meridian: 6

Footage at surface: Distance: 300 feet Direction: FNL Distance: 764 feet Direction: FWL

As Drilled Latitude: 40.639220 As Drilled Longitude: -104.198890

GPS Data:

Date of Measurement: 01/16/2014 PDOP Reading: 2.6 GPS Instrument Operator's Name: Marc Woodard

** If directional footage at Top of Prod. Zone Dist.: 426 feet. Direction: FNL Dist.: 587 feet. Direction: FWL

Sec: 27 Twp: 8N Rng: 61W

** If directional footage at Bottom Hole Dist.: 351 feet. Direction: FSL Dist.: 661 feet. Direction: FWL

Sec: 27 Twp: 8N Rng: 61W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 11/03/2013 Date TD: 11/11/2013 Date Casing Set or D&A: 11/08/2013

Rig Release Date: 11/20/2013 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 11182 TVD** 6545 Plug Back Total Depth MD 11182 TVD** 6545

Elevations GR 4999 KB 5016 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

MWD with Gamma Ray, 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	18	16	36.9	0	60	8	0	60	VISU
SURF	12+1/4	9+5/8	36	0	1,444	628	0	1,444	VISU
1ST	8+3/4	7	23	0	6,647	606	0	6,647	VISU
1ST LINER	6+1/8	4+1/2	11.6	5891	11,157				

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	551		NO	NO	
PARKMAN	3,618	4,042	NO	NO	
SUSSEX	4,292	4,412	NO	NO	
SHARON SPRINGS	6,347	6,465	NO	NO	
NIOBRARA	6,465	11,182	NO	NO	

Comment:

Open Hole log was not ran in this well. The COGCC Log Submittal Policy had not yet been released at the time of this completion.

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

Signed: _____ Print Name: Jeff Annable

Title: Regulatory Analyst Date: _____ Email: regulatory@petro-fs.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400934617	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400934622	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>		
400934611	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400934612	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400934613	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400934620	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)