

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



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Document Number:
400955463

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 05-123-36068-00 County: WELD
 Well Name: Bringelson Ranch Well Number: 2-20-11-9-58
 Location: QtrQtr: NWNW Section: 20 Township: 9N Range: 58W Meridian: 6
 Footage at surface: Distance: 1249 feet Direction: FNL Distance: 275 feet Direction: FWL
 As Drilled Latitude: 40.740410 As Drilled Longitude: -103.896660

GPS Data:
 Date of Measurement: 10/02/2013 PDOP Reading: 3.0 GPS Instrument Operator's Name: Marc Woodard

** If directional footage at Top of Prod. Zone Dist.: 2309 feet. Direction: FNL Dist.: 748 feet. Direction: FWL
 Sec: 20 Twp: 9N Rng: 58W
 ** If directional footage at Bottom Hole Dist.: 2419 feet. Direction: FNL Dist.: 652 feet. Direction: FEL
 Sec: 20 Twp: 9N Rng: 58w

Field Name: DJ HORIZONTAL NIOBRARA Field Number: 16950
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 05/11/2013 Date TD: 05/30/2013 Date Casing Set or D&A: 05/26/2013
 Rig Release Date: 06/01/2013 Per Rule 308A.b.

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

Total Depth MD 10290 TVD** 5879 Plug Back Total Depth MD 10290 TVD** 5879

Elevations GR 4867 KB 4884 **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	1,412	593	0	1,412	VISU
1ST	8+3/4	7	23	0	6,098	516	400	6,098	CBL
1ST LINER	6+1/8	4+1/2	11.6	5161	10,275				

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	5,844	5,982	NO	NO	NO UPPER TOPS WERE RECORDED IN THIS WELL.
NIOBRARA	5,982	10,290	NO	NO	

Comment:

NO ADDITIONAL FORMATIONS RECORDED. OPEN HOLE LOG NOT RUN. COGCC LOG SUBMITTAL POLICY WAS NOT RELEASED AT THE TIME OF DRILLING THIS WELL.

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 Compliance

Date: _____

Email: madelon.raney@crzo.net

Attachment Check List

Att Doc Num	Document Name	attached ?
Attachment Checklist		
400955490	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400955492	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		
400955484	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400955485	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400955486	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400955495	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)