

FORM
5Rev
09/14State 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:

401003554

Date Received:

03/11/2016

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 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: 10000 Contact Name: Randy Loudenburg
 Name of Operator: BP AMERICA PRODUCTION COMPANY Phone: (970) 335-3828
 Address: 380 AIRPORT RD Fax: (970) 375-7529
 City: DURANGO State: CO Zip: 81303

API Number 05-067-08794-00 County: LA PLATA
 Well Name: CLOVIS A Well Number: 2
 Location: QtrQtr: NESW Section: 6 Township: 33N Range: 9W Meridian: N
 Footage at surface: Distance: 1425 feet Direction: FSL Distance: 1695 feet Direction: FWL
 As Drilled Latitude: As Drilled Longitude:

GPS Data:

Date of Measurement: PDOP Reading: GPS Instrument Operator's Name:

** If directional footage at Top of Prod. Zone Dist.: feet Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

** If directional footage at Bottom Hole Dist.: feet Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

Field Name: IGNACIO BLANCO Field Number: 38300

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 05/20/2003 Date TD: 05/25/2003 Date Casing Set or D&A: 05/25/2003

Rig Release Date: Per Rule 308A.b.

Well Classification:

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

Total Depth MD 2844 TVD** Plug Back Total Depth MD 2820 TVD**

Elevations GR 6316 KB 6329 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

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
SURF	12+1/4	8+5/8	20	0	419	300	0	419	VISU
1ST	7+7/8	5+1/2	15.5	0	2,836	320	0	2,836	VISU

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	
FRUITLAND COAL	2,445	2,686	NO	NO	

Operator Comments

 Deepened PBSD to 2820'

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

Signed: _____

Print Name: Randy LoudenburgTitle: Regulatory AgentDate: 3/11/2016Email: rloudenburg@bp.com

Attachment Check List

Att Doc Num	Document Name	attached ?
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Attachment Checklist

	CMT Summary *	Yes <input type="checkbox"/>	No <input checked="" 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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

Other Attachments

401003554	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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General Comments

User Group	Comment	Comment Date
Permit	Corrected 1st string csg information, per operator.	3/17/2016 8:16:40 AM
Permit	Contacted operator to check the 1st string csg setting depths.	3/16/2016 1:59:52 PM

Total: 2 comment(s)