

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



Document Number:

400904941

Date Received:

09/24/2015

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: 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 05-123-41239-00 County: WELD  
Well Name: PTASNIK Well Number: 2-30-9-59  
Location: QtrQtr: Lot 4 Section: 30 Township: 9N Range: 59W Meridian: 6  
Footage at surface: Distance: 446 feet Direction: FSL Distance: 416 feet Direction: FWL  
As Drilled Latitude: 40.715190 As Drilled Longitude: -104.028830

GPS Data:  
Date of Measurement: 09/22/2015 PDOP Reading: 1.4 GPS Instrument Operator's Name: SHAN SETHNA

\*\* If directional footage at Top of Prod. Zone Dist.: 548 feet Direction: FSL Dist.: 481 feet Direction: FWL  
Sec: 30 Twp: 9N Rng: 59W

\*\* If directional footage at Bottom Hole Dist.: 311 feet Direction: FNL Dist.: 476 feet Direction: FWL  
Sec: 30 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) 04/18/2015 Date TD: 04/24/2015 Date Casing Set or D&A: 04/26/2015  
Rig Release Date: 05/13/2015 Per Rule 308A.b.

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

Total Depth MD 10832 TVD\*\* 6071 Plug Back Total Depth MD 10832 TVD\*\* 6071  
Elevations GR 4917 KB 4934 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:  
MWD W/ GAMMA RAY, RBL & DUAL INDUCTION 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	60	8	0	60	VISU
SURF	12+1/4	9+5/8	36	0	1,645	485	0	1,645	VISU
1ST	8+3/4	7	23	0	6,335	445	884	6,335	CBL
2ND	6+1/8	4+1/2	11.6	0	10,786				

**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	573	6,226	NO	NO	
PARKMAN	3,466	3,778	NO	NO	
SUSSEX	4,208	4,599	NO	NO	
SHARON SPRINGS	6,040	6,226	NO	NO	
NIOBRARA	6,226	10,832	NO	NO	

**Operator Comments**

OPEN HOLE LOG RUN ON THIS WELL FOR REFERENCE TO ALL WELLS ON THIS MULTI-WELL PAD.

WELL DRILLED TO TD, LINER SET. WELL NOT FRAC'D. WELL SHUT-IN PENDING COMMODITY PRICING.

THE TOP OF PRODUCTION IS OBTAINED BY REPORTING THE CASING SHOE DEPTH.

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: 9/24/2015

Email: CAROL.PRUITT@CRZO.NET

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400905003	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400905001	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"/>
<b>Other Attachments</b>			
2451255	MEASURED WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400904941	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400904990	CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400904991	DUAL INDUCTION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400904992	DUAL INDUCTION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400904994	MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400904995	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400904998	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	Casing set date corrected as per operator. Changed well status to "waiting on completion" (WO) in well update.	2/11/2016 3:13:12 PM
Permit	Requested MWD log to TD. Attached MWD log to TD.	12/4/2015 7:53:12 AM

Total: 2 comment(s)