

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:

401110352

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: 96850

Contact Name: Whitney Szabo

Name of Operator: TEP ROCKY MOUNTAIN LLC

Phone: (970) 263-2730

Address: PO BOX 370

Fax:

City: PARACHUTE State: CO Zip: 81635

API Number 05-045-22526-00

County: GARFIELD

Well Name: Federal GM

Well Number: 43-8

Location: QtrQtr: NWNW Section: 9 Township: 7S Range: 96W Meridian: 6

Footage at surface: Distance: 676 feet Direction: FNL Distance: 545 feet Direction: FWL

As Drilled Latitude: 39.456823 As Drilled Longitude: -108.120012

GPS Data:

Date of Measurement: 01/12/2015 PDOP Reading: 3.2 GPS Instrument Operator's Name: J. Kirkpatrick

** If directional footage at Top of Prod. Zone Dist.: 2423 feet. Direction: FSL Dist.: 619 feet. Direction: FEL

Sec: 8 Twp: 7S Rng: 96W

** If directional footage at Bottom Hole Dist.: 2405 feet. Direction: FSL Dist.: 637 feet. Direction: FEL

Sec: 8 Twp: 7S Rng: 96W

Field Name: GRAND VALLEY

Field Number: 31290

Federal, Indian or State Lease Number: COC24603

Spud Date: (when the 1st bit hit the dirt) 05/28/2016 Date TD: 06/01/2016 Date Casing Set or D&A: 06/01/2016

Rig Release Date: 07/19/2016 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 7247 TVD** 6515 Plug Back Total Depth MD 7180 TVD** 6454

Elevations GR 6087 KB 6111 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL/MUD/RPM

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 | 26 | 18 | 47.4 | 0 | 42 | 16 | 0 | 42 | VISU |
| SURF | 13+1/2 | 9+5/8 | 32.3 | 0 | 1,397 | 360 | 0 | 1,397 | VISU |
| 1ST | 8+3/4 | 4+1/2 | 11.6 | 0 | 7,237 | 805 | 3,839 | 7,237 | CBL |

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 | |
| WASATCH G | 2,482 | | | | |
| MESAVERDE | 4,194 | | | | Mesaverde top is the Williams Fork top. |
| WILLIAMS FORK | 4,194 | | | | Williams Fork top is the Mesaverde top. |
| CAMEO | 6,624 | | | | |
| ROLLINS | 7,082 | | | | |

Comment:

Please note: The "as-drilled" GPS information provided is actual data of the existing well conductor location prior to the big rig spud date.

**The Ohio Creek formation is not present in this area, therefore it is not included on the formation information tab.

*** The CBL PBTD (depth logger) in this well is set above the float collar, the float collar is set at 7208'.

**** No resistivity logs were run on this well; Resistivity log were ran on the GM 322-9 API #05-045-22531.

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

Signed: _____

Print Name: Whitney Szabo

Title: Regulatory Tech

Date: _____

Email: wszabo@terraep.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|-----------------------|---|--|
| <u>Attachment Checklist</u> | | | |
| 401110372 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 401110370 | 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> | | | |
| 401110376 | DIRECTIONAL DATA | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401110385 | PDF-CBL 1ST RUN | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401110387 | LAS-CBL 1ST RUN | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401110390 | LAS-PULSED NEUTRON | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401110391 | PDF-PULSED NEUTRON | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401110395 | LAS-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401110397 | PDF-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

General Comments

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

Total: 0 comment(s)