

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:

401178733

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 05-045-23235-00

County: GARFIELD

Well Name: Youberg

Well Number: RU 311-7

Location: QtrQtr: SENW Section: 7 Township: 7S Range: 93W Meridian: 6

Footage at surface: Distance: 1990 feet Direction: FNL Distance: 1901 feet Direction: FWL

As Drilled Latitude: 39.457024 As Drilled Longitude: -107.819698

## GPS Data:

Date of Measurement: 06/16/2016 PDOP Reading: 1.9 GPS Instrument Operator's Name: J. Kirkpatrick

\*\* If directional footage at Top of Prod. Zone Dist.: 258 feet. Direction: FNL Dist.: 916 feet. Direction: FWL

Sec: 7 Twp: 7S Rng: 93W

\*\* If directional footage at Bottom Hole Dist.: 228 feet. Direction: FNL Dist.: 861 feet. Direction: FWL

Sec: 7 Twp: 7S Rng: 93W

Field Name: RULISON

Field Number: 75400

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 10/10/2016 Date TD: 10/15/2016 Date Casing Set or D&amp;A: 10/16/2016

Rig Release Date: 10/16/2016 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 9798 TVD\*\* 9475 Plug Back Total Depth MD 9746 TVD\*\* 9416

Elevations GR 7339 KB 7363 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

CBL/MUD/RPM/Triple Combo in 05-045-23232

## 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	84	31	0	84	VISU
SURF	13+1/2	9+5/8	32.3	0	1,144	310	0	1,144	VISU
1ST	8+3/4	4+1/2	11.6	0	9,788	1,120	3,584	9,788	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	3,514				
MESAVERDE	5,882				Mesaverde top is the OH Creek top.
OHIO CREEK	5,882				OH Creek top is the Mesaverde top.
WILLIAMS FORK	6,052				
CAMEO	8,795				
ROLLINS	9,640				

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 CBL PBTD (depth logger) for this well is set above the float collar, the float collar is set at 9759'.

No open hole logs were run on this well. Triple combination logs were run on the RU 23-7 (05-045-23232).

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>			
401178746	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401178745	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>			
401178749	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401178758	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401178760	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401178763	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401178764	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401178765	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401178766	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)