

**DRILLING COMPLETION REPORT**

Document Number:  
401211462

Date Received:

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 05-045-23257-00 County: GARFIELD  
 Well Name: YOUBERG Well Number: RU 413-7  
 Location: QtrQtr: LOT 3 Section: 7 Township: 7S Range: 93W Meridian: 6  
 Footage at surface: Distance: 1926 feet Direction: FSL Distance: 158 feet Direction: FWL  
 As Drilled Latitude: 39.452118 As Drilled Longitude: -107.825802

GPS Data:  
 Date of Measurement: 08/04/2016 PDOP Reading: 1.7 GPS Instrument Operator's Name: W. Kirkpatrick

\*\* If directional footage at Top of Prod. Zone Dist.: 1626 feet. Direction: FSL Dist.: 311 feet. Direction: FWL  
 Sec: 7 Twp: 7S Rng: 93W  
 \*\* If directional footage at Bottom Hole Dist.: 1611 feet. Direction: FSL Dist.: 325 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) 11/24/2016 Date TD: 11/29/2016 Date Casing Set or D&A: 11/30/2016  
 Rig Release Date: 01/31/2017 Per Rule 308A.b.

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

Total Depth MD 9422 TVD\*\* 9404 Plug Back Total Depth MD 9344 TVD\*\* 9345  
 Elevations GR 7357 KB 7381 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
CBL/MUD/RPM/Triple Combo in the RU 514-7

**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	18	26	47.4	0	60	100	0	60	VISU
SURF	13+1/2	9+5/8	32.3	0	1,152	305	0	1,152	VISU
1ST	8+3/4	4+1/2	11.6	0	9,412	1,100	3,762	9,412	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	3,227				Formation top is an estimate, data was not being recorded when the logs were at this depth.
MESAVERDE	5,622				Mesaverde top is the OH Creek top.
OHIO CREEK	5,622				OH creek top is the Mesaverde top.
WILLIAMS FORK	5,766				
CAMEO	8,437				
ROLLINS	9,282				

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.

\*No open hole logs were run on this well. Triple combination logs were run on the RU 514-7 (045-23260).

\*\*The CBL PBD (depth logger) for this well is set above the float collar, the float collar is set at 9383'.

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 ?	
<b>Attachment Checklist</b>			
401211482	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401211480	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>			
401211486	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401211494	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401211521	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401211524	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401211533	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401211543	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401211551	PDF-PULSED NEUTRON	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)