

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:

401182881

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: 10456

Contact Name: Reed Haddock

Name of Operator: CAERUS PICEANCE LLC

Phone: (720) 880-6369

Address: 1001 17TH STREET #1600

Fax: (303) 565-4606

City: DENVER State: CO Zip: 80202

API Number 05-045-23371-00

County: GARFIELD

Well Name: Puckett

Well Number: 22B-26-697

Location: QtrQtr: NWNE Section: 26 Township: 6S Range: 97W Meridian: 6

Footage at surface: Distance: 877 feet Direction: FNL Distance: 1409 feet Direction: FEL

As Drilled Latitude: 39.498831 As Drilled Longitude: -108.183050

GPS Data:

Date of Measurement: 08/29/2016 PDOP Reading: 1.5 GPS Instrument Operator's Name: Bart Hunting

** If directional footage at Top of Prod. Zone Dist.: 1633 feet. Direction: FNL Dist.: 2264 feet. Direction: FWL

Sec: 26 Twp: 6S Rng: 97W

** If directional footage at Bottom Hole Dist.: 1633 feet. Direction: FNL Dist.: 2264 feet. Direction: FWL

Sec: 26 Twp: 6S Rng: 97W

Field Name: GRAND VALLEY

Field Number: 31290

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 01/11/2017 Date TD: 01/16/2017 Date Casing Set or D&A: 01/17/2017

Rig Release Date: 05/04/2017 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 9106 TVD** 8889 Plug Back Total Depth MD 9054 TVD** 8837

Elevations GR 8396 KB 8426 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

CBL, PNL

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 | 30 | 20 | 54# | 0 | 100 | 218 | 0 | 100 | CALC |
| SURF | 14+3/4 | 9+5/8 | 40# | 0 | 2,505 | 864 | 0 | 2,505 | CALC |
| 1ST | 8+3/4 | 4+1/2 | 11.6# | 0 | 9,060 | 941 | 3,089 | 9,060 | CALC |

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 | 4,538 | 4,842 | NO | NO | |
| FORT UNION | 4,842 | 6,183 | NO | NO | |
| OHIO CREEK | 6,183 | 6,381 | NO | NO | |
| WILLIAMS FORK | 6,381 | 8,508 | NO | NO | |
| CAMEO | 8,508 | 8,960 | NO | NO | |
| ROLLINS | 8,960 | | NO | NO | |

Comment:

All casing and cement information and formation tops are measured from KB. Per the approved Form 2 APD for the subject well, one gamma ray and one resistivity log was required for this multi-well pad. Please refer to the open hole logs submitted with the Puckett 32A-26 (API# 05-045-23358).

COGCC currently has open hole logs for 697-26A #12 (API No. 05-045-19229). This well was logged by Marathon Oil Co. in June 2010.

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

Signed: _____

Print Name: Reed Haddock

Title: Sr. Regulatory Specialist

Date: _____

Email: rhaddock@caerusoilandgas.com

Attachment Check List

| Att Doc Num | Document Name | attached ? |
|-----------------------------|-----------------------|---|
| <u>Attachment Checklist</u> | | |
| 401187338 | CMT Summary * | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 401187339 | 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> | | |
| 401187340 | DIRECTIONAL DATA | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401296128 | LAS-PULSED NEUTRON | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401296129 | LAS-CEMENT BOND | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401296131 | PDF-PULSED NEUTRON | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401296132 | PDF-CEMENT BOND | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401296134 | WELL LOCATION PLAT | 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)