

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



DE	ET	OE	ES
----	----	----	----

Document Number:
401253439

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 05-045-23353-00 County: GARFIELD
 Well Name: Puckett Well Number: 34C-23-697
 Location: QtrQtr: NWNE Section: 26 Township: 6S Range: 97W Meridian: 6
 Footage at surface: Distance: 859 feet Direction: FNL Distance: 1411 feet Direction: FEL
 As Drilled Latitude: 39.498881 As Drilled Longitude: -108.183056

GPS Data:
 Date of Measurement: 08/29/2016 PDOP Reading: 1.2 GPS Instrument Operator's Name: Bart Hunting

** If directional footage at Top of Prod. Zone Dist.: 1006 feet. Direction: FSL Dist.: 1018 feet. Direction: FEL
 Sec: 23 Twp: 6S Rng: 97W
 ** If directional footage at Bottom Hole Dist.: 1006 feet. Direction: FSL Dist.: 1018 feet. Direction: FEL
 Sec: 23 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) 04/07/2017 Date TD: 04/11/2017 Date Casing Set or D&A: 04/12/2017
 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 9343 TVD** 9061 Plug Back Total Depth MD 9291 TVD** 9009

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	2,518	864	0	2,518	CALC
1ST	8+3/4	4+1/2	11.6#	0	9,326	941	4,019	9,326	

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	4,653	4,966			
FORT UNION	4,966	6,357			
OHIO CREEK	6,357	6,572			
WILLIAMS FORK	6,572	8,717			
CAMEO	8,717	9,163			
ROLLINS	9,163				

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 ?	
Attachment Checklist			
401254197	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401260114	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"/>
Other Attachments			
401260115	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401297043	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401297045	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401297047	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401297051	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401297056	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)