

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:

401304081

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: KELLYE GARCIA

Name of Operator: TEP ROCKY MOUNTAIN LLC

Phone: (832) 726-1159

Address: PO BOX 370

Fax:

City: PARACHUTE State: CO Zip: 81635

API Number 05-045-23345-00

County: GARFIELD

Well Name: Chevron

Well Number: TR 513-21-597

Location: QtrQtr: SESW Section: 21 Township: 5S Range: 97W Meridian: 6

Footage at surface: Distance: 690 feet Direction: FSL Distance: 1862 feet Direction: FWL

As Drilled Latitude: 39.593805 As Drilled Longitude: -108.285825

GPS Data:

Date of Measurement: 12/14/2016 PDOP Reading: 1.7 GPS Instrument Operator's Name: J. KIRKPATRICK

** If directional footage at Top of Prod. Zone Dist.: 1385 feet. Direction: FSL Dist.: 419 feet. Direction: FWL

Sec: 21 Twp: 5S Rng: 97W

** If directional footage at Bottom Hole Dist.: 1331 feet. Direction: FSL Dist.: 344 feet. Direction: FWL

Sec: 21 Twp: 5S Rng: 97W

Field Name: TRAIL RIDGE

Field Number: 83825

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 01/27/2017 Date TD: 03/24/2017 Date Casing Set or D&A: 03/24/2017

Rig Release Date: 04/19/2017 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 9555 TVD** 9287 Plug Back Total Depth MD 9469 TVD** 9201

Elevations GR 8292 KB 8316 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL/PULSED NEUTRON LOG/TRIPLE COMBO IN 045-23339

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	47.44	0	63	105	0	63	CALC
SURF	14+3/4	9+5/8	36	0	2,717	1,245	0	2,717	CALC
1ST	8+3/4	4+1/2	11.6	0	9,555	1,315	4,520	9,555	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	2,433				
WASATCH G	4,352				
MESAVERDE	5,634				Mesaverde is the Ohio Creek top.
OHIO CREEK	5,634				Ohio Creek top is the Mesaverde top.
WILLIAMS FORK	5,828				
CAMEO	8,284				
ROLLINS	8,679				
COZZETTE	8,849				
CORCORAN	9,076				
SEGO	9,252				

Comment:

The GPS date of measurement is actual data of the existing well conductor location prior to the spud date.

No Open Hole Logs were run on this well. Triple Combination Logs were run on TR 313-21-597 (045-23339).

No MUD logs were run on this well.

The "depth driller" on the CBL reflects the Form 2 proposed depth. The actual TD is 9555' for this well.

No top out cement job was done on this well.

PBTD matches CBL per Craig Burger.

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

Signed: _____

Print Name: KELLYE GARCIA

Title: LAND TECHNICIAN

Date: _____

Email: KGARCIA@TERRAEP.COM

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
401304132	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
401314051	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>		
401304106	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401304116	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401304129	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401312509	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401362773	LAS-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)