

FORM
5Rev
09/14State 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:

401301861

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 05-045-23239-00

County: GARFIELD

Well Name: Chevron

Well Number: 11D-17

Location: QtrQtr: Lot 1 Section: 17 Township: 6S Range: 96W Meridian: 6

Footage at surface: Distance: 1268 feet Direction: FNL Distance: 2034 feet Direction: FEL

As Drilled Latitude: 39.528228 As Drilled Longitude: -108.129644

GPS Data:

Date of Measurement: 08/15/2017 PDOP Reading: 1.6 GPS Instrument Operator's Name: Brian Baker

** If directional footage at Top of Prod. Zone Dist.: 1203 feet. Direction: FNL Dist.: 827 feet. Direction: FWL

Sec: 17 Twp: 6S Rng: 96W

** If directional footage at Bottom Hole Dist.: 1203 feet. Direction: FNL Dist.: 827 feet. Direction: FWL

Sec: 17 Twp: 6S Rng: 96W

Field Name: GRAND VALLEY

Field Number: 31290

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 06/03/2017 Date TD: 06/08/2017 Date Casing Set or D&A: 06/08/2017

Rig Release Date: 07/01/2017 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 7740 TVD** 7070 Plug Back Total Depth MD 7679 TVD** 7009

Elevations GR 5583 KB 5613 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	52.8#	0	100	218	100	0	CALC
SURF	14+3/4	9+5/8	36#	0	1,060	278	0	1,060	CALC
1ST	8+3/4	4+1/2	11.6#	0	7,691	712	3,959	7,691	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	
ALLUVIUM	0	810	NO	NO	
WASATCH	810	2,730	NO	NO	
WASATCH G	2,730	3,118	NO	NO	
FORT UNION	3,118	4,460	NO	NO	
OHIO CREEK	4,460	4,742	NO	NO	
WILLIAMS FORK	4,742	7,088	NO	NO	
CAMEO	7,088	7,573	NO	NO	
ROLLINS	7,573				

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 Chevron 22E-17 (API# 05-045-23237).

COGCC currently has open hole logs for Chevron # 21A-17D (API No. 05-045-09541). This well was logged by Petroleum Development Corporation in May 2004.

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>		
401301883	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
401304521	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>		
401304522	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401363423	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401363425	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401363427	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401363428	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401378644	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401388952	DIRECTIONAL DATA	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)