

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



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Document Number:
401382468

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: Kelye 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 05-045-23433-00 County: GARFIELD
 Well Name: Youberg Well Number: SR 521-12
 Location: QtrQtr: SWNE Section: 12 Township: 7S Range: 94W Meridian: 6
 Footage at surface: Distance: 1890 feet Direction: FNL Distance: 2125 feet Direction: FEL
 As Drilled Latitude: 39.455421 As Drilled Longitude: -107.833935

GPS Data:
 Date of Measurement: 04/21/2016 PDOP Reading: 2.8 GPS Instrument Operator's Name: J. Kirkpatrick

** If directional footage at Top of Prod. Zone Dist.: 1092 feet. Direction: FNL Dist.: 1828 feet. Direction: FWL
 Sec: 12 Twp: 7S Rng: 94W
 ** If directional footage at Bottom Hole Dist.: 1127 feet. Direction: FNL Dist.: 1812 feet. Direction: FWL
 Sec: 12 Twp: 7S Rng: 94W

Field Name: RULISON Field Number: 75400
 Federal, Indian or State Lease Number: COC36490

Spud Date: (when the 1st bit hit the dirt) 05/16/2017 Date TD: 06/27/2017 Date Casing Set or D&A: 06/29/2017
 Rig Release Date: 08/13/2017 Per Rule 308A.b.

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

Total Depth MD 9522 TVD** 9302 Plug Back Total Depth MD 9460 TVD** 9240

Elevations GR 7254 KB 7278 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL/MUD/PULSED NEUTRON LOG/TRIPLE COMBO

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	84	140	0	84	VISU
SURF	13+1/2	9+5/8	36	0	1,140	300	0	1,140	VISU
1ST	8+3/4	4+1/2	11.6	0	9,522	1,050	4,618	9,522	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	3,349				
MESAVERDE	5,704				The Mesaverde is the Ohio Creek Top.
OHIO CREEK	5,704				The Ohio Creek Top is the Mesaverde Top.
WILLIAMS FORK	5,870				
CAMEO	8,620				
ROLLINS	9,402				

Comment:

The GPS "as drilled" coordinates and date of measurement are actual data of the existing well conductor location prior to the spud date.

PBTD matches the CBL per Craig Burger.

No top out cement job was done on this well.

The "depth driller" on the CBL reflects the Form 2 proposed depth. The actual TD is 9522' for this well.

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 & Regulatory Tech

Date: _____

Email: kgarcia@terraep.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401382488	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401394736	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			
401382475	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401382476	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401382477	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401382478	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401382479	PDF-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401382480	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401382481	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401382483	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401382731	TIF-MUD	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)