

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



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Document Number:

401547949

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: 10433

Contact Name: MEL LACKIE

Name of Operator: LARAMIE ENERGY LLC

Phone: (303) 339-4400

Address: 1401 SEVENTEENTH STREET #1400

Fax: (303) 339-4399

City: DENVER State: CO Zip: 80202

API Number 05-077-10404-00

County: MESA

Well Name: Nichols

Well Number: 0994-24-07W

Location: QtrQtr: SWNE Section: 24 Township: 9S Range: 94W Meridian: 6

Footage at surface: Distance: 1826 feet Direction: FNL Distance: 2805 feet Direction: FEL

As Drilled Latitude: 39.264578 As Drilled Longitude: -107.830644

GPS Data:

Date of Measurement: 08/06/2017 PDOP Reading: 1.4 GPS Instrument Operator's Name: CODY RICH

** If directional footage at Top of Prod. Zone Dist.: 1547 feet. Direction: FNL Dist.: 1529 feet. Direction: FWL

Sec: 24 Twp: 9S Rng: 94W

** If directional footage at Bottom Hole Dist.: 1547 feet. Direction: FNL Dist.: 1529 feet. Direction: FWL

Sec: 24 Twp: 9S Rng: 94W

Field Name: BRUSH CREEK

Field Number: 7562

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 12/04/2017 Date TD: 12/08/2017 Date Casing Set or D&A: 12/09/2017

Rig Release Date: 02/14/2018 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 7531 TVD** 7354 Plug Back Total Depth MD 7429 TVD** 7252

Elevations GR 7137 KB 7161 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

RPM, PULSED NEUTRON, CBL, MUD

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	16	65	0	84	100	0	84	VISU
SURF	11	8+5/8	24	0	1,546	288	0	1,546	VISU
1ST	7+7/8	4+1/2	11.6	0	7,521	1,151	1,730	7,521	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	
OHIO CREEK	4,295				
WILLIAMS FORK	4,675				
CAMEO	6,588				
ROLLINS	7,273				

Comment:

NO OPEN HOLE LOGS RUN ON THIS WELL. THE ONLY OH LOG RUN ON THIS PAD WAS THE NICHOLS 0994 24-06W.

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

Signed: _____

Print Name: MEL LACKIE

Title: ENGINEERING TECHNICIAN

Date: _____

Email: mlackie@laramie-energy.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
401547994	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
401547992	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>					
401547990	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401547995	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401547999	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401548001	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401548002	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401548004	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401548005	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401548006	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401548007	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401548008	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401548009	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401548010	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401594599	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)