

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:
401561402

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 05-077-10471-00 County: MESA
 Well Name: Bruton Well Number: 30-14E
 Location: QtrQtr: SWNE Section: 30 Township: 9S Range: 93W Meridian: 6
 Footage at surface: Distance: 2606 feet Direction: FNL Distance: 1874 feet Direction: FEL
 As Drilled Latitude: 39.248189 As Drilled Longitude: -107.808908

GPS Data:
 Date of Measurement: 10/28/2017 PDOP Reading: 1.7 GPS Instrument Operator's Name: BART HUNTING

** If directional footage at Top of Prod. Zone Dist.: 1857 feet. Direction: FSL Dist.: 1365 feet. Direction: FEL
 Sec: 30 Twp: 9S Rng: 93W

** If directional footage at Bottom Hole Dist.: 1857 feet. Direction: FSL Dist.: 1365 feet. Direction: FEL
 Sec: 30 Twp: 9S Rng: 93W

Field Name: BRUSH CREEK Field Number: 7562

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 12/08/2017 Date TD: 12/13/2017 Date Casing Set or D&A: 12/14/2017

Rig Release Date: 02/13/2018 Per Rule 308A.b.

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

Total Depth MD 7897 TVD** 7753 Plug Back Total Depth MD 7795 TVD** 7651

Elevations GR 7643 KB 7673 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
TRIPLE COMBO, BHP, 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	90	100	0	90	VISU
SURF	11	8+5/8	24	0	1,555	306	0	1,555	VISU
1ST	7+7/8	4+1/2	11.6	0	7,887	1,277	1,044	7,887	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	4,609				
WILLIAMS FORK	5,015				
CAMEO	7,053				
ROLLINS	7,689				

Comment:

OPEN HOLE LOGS WERE RUN ON THIS WELL. THIS IS THE ONLY WELL ON THE PAD TO DO SO.

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 ?	
Attachment Checklist			
401561820	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401561822	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			
401561729	PDF-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561731	PDF-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561732	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561735	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561737	PDF-CALIPER	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561739	PDF-CALIPER	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561740	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561741	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561742	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561746	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561747	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561748	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561749	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561750	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561751	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561752	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561753	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561754	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561755	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401561819	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401581653	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)