

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:

401633731

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 05-077-10544-00

County: MESA

Well Name: Gunderson

Well Number: 0994-13-07W

Location: QtrQtr: NESW Section: 13 Township: 9S Range: 94W Meridian: 6

Footage at surface: Distance: 1620 feet Direction: FSL Distance: 1721 feet Direction: FWL

As Drilled Latitude: 39.273914 As Drilled Longitude: -107.834827

GPS Data:

Date of Measurement: 09/29/2017 PDOP Reading: 1.3 GPS Instrument Operator's Name: T SHERRILL

** If directional footage at Top of Prod. Zone Dist.: 1643 feet. Direction: FNL Dist.: 1643 feet. Direction: FWL

Sec: 13 Twp: 9S Rng: 94W

** If directional footage at Bottom Hole Dist.: 1643 feet. Direction: FNL Dist.: 1643 feet. Direction: FWL

Sec: 13 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) 02/28/2018 Date TD: 03/02/2018 Date Casing Set or D&A: 03/03/2018

Rig Release Date: 05/12/2018 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 7972 TVD** 7574 Plug Back Total Depth MD 7876 TVD** 7478

Elevations GR 7272 KB 7302 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	37	0	90	100	0	90	VISU
SURF	11	8+5/8	24	0	1,545	306	0	1,545	VISU
1ST	7+7/8	4+1/2	11.6	0	7,962	1,282	520	7,962	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	4,877				
WILLIAMS FORK	5,235				
CAMEO	7,235				
ROLLINS	7,736				

Comment:

NO OH LOGS RUN ON THIS WELL. THE ONLY WELL OH LOGGED ON THIS PAD WAS THE GUNDERSON 0994 13-06W API# 0507710541

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>					
401663530	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
401663528	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>					
401663524	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401663549	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401671869	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401671875	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401671879	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401671881	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401671896	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401671897	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401671901	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401671904	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401671913	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401672486	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401672498	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401672499	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)