

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:
401733998

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: 10464 Contact Name: Nolan Redmond
Name of Operator: CATAMOUNT ENERGY PARTNERS LLC Phone: (720) 484-2347
Address: 1801 BROADWAY #1000 Fax:
City: DENVER State: CO Zip: 80202

API Number 05-067-10021-00 County: LA PLATA
Well Name: Jaques Well Number: 9
Location: QtrQtr: SENW Section: 27 Township: 33N Range: 8W Meridian: N
Footage at surface: Distance: 2111 feet Direction: FNL Distance: 1711 feet Direction: FWL
As Drilled Latitude: 37.076487 As Drilled Longitude: -107.707861

GPS Data:
Date of Measurement: 08/16/2018 PDOP Reading: 1.8 GPS Instrument Operator's Name: Nelson Ross

** If directional footage at Top of Prod. Zone Dist.: 767 feet. Direction: FNL Dist.: 779 feet. Direction: FWL
Sec: 27 Twp: 33N Rng: 8W
** If directional footage at Bottom Hole Dist.: 669 feet. Direction: FNL Dist.: 664 feet. Direction: FWL
Sec: 27 Twp: 33N Rng: 8W

Field Name: IGNACIO BLANCO Field Number: 38300
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/21/2018 Date TD: 07/23/2018 Date Casing Set or D&A: 07/27/2018
Rig Release Date: 07/27/2018 Per Rule 308A.b.

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

Total Depth MD 4248 TVD** 3670 Plug Back Total Depth MD 4186 TVD** 3612

Elevations GR 7031 KB 7042 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
Resistivity, Gamma Ray, Cased Hole Neutron, CBL

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
SURF	12+1/4	8+5/8	23	0	512		0	512	VISU
1ST	7+7/8	5+1/2	17	0	4,232		0	4,232	VISU

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	
FRUITLAND COAL	3,839	4,078	NO	NO	

Comment:

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

Signed: _____ Print Name: Nolan Redmond

Title: Geo/Eng Tech Date: _____ Email: nredmond@catamountep.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401744124	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401734184	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			
401734082	LAS-NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401734084	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401734205	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401734369	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401734371	PDF-NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401734383	PDF-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401734384	LAS-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)