

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109



FOR OGCC USE ONLY  
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COGCC  
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DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of a well's completion. 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, submit Form 6 (Well Abandonment Report).



Complete the Attachment Checklist

	Oper	OGCC
Survey Plat		
Directional Survey		
Surface Equip. Diagram		
Technical Info. Page		
Other		

1. OGCC Operator Number: 69175  
 2. Name of Operator: Petroleum Development Corporation  
 3. Address: 103 East Main Street, P.O. Box 26  
 City: Bridgeport State: WV ZIP: 26330  
 4. Contact Name and Telephone  
 Name: Eric R. Stearns, VP of Exploration & Development  
 Phone: (304) 842-3597 Fax: (304) 842-0913  
 5. API Number: 05-045-07637-00  
 6. County: GARFIELD  
 7. Well Name: UNOCAL Well Number: #13-9D  
 8. Location (QtrQtr, Sec, Twp, Rng, Meridian): SWNW, SEC9, T6S, R96W, 6th  
 Footage at Surface: 2144' FNL, 928' FWL  
 If directional, footage at Top of Prod. Zone: 1900' FSL, 651' FWL  
 If directional, footage at Bottom Hole: 1754' FSL, 621' FWL  
 9. Was a directional survey run?  Y  N  
 Field Number: 31290  
 10. Field Name: GRAND VALLEY  
 11. Federal, Indian or State lease Number:  
 12. Spud Date: 12/11/00 12. Date TD: 4/16/01  
 16. Total Depth: MD 7907 TVD 7710 17. Plug Back Total: MD 7900' TVD 7703  
 14. Date Completed or D&A: 5/21/01  
 18. Was a Mud Log Run?  Yes  No  
 \*\*One copy of all electronic and mud logs must be submitted.\*\*  
 19. Elevations GR 5794' KB 5809'

15. Well Classification  
 Dry  Oil  Gas  
 Coalbed  
 Stratigraphic  Disposal  
 Enhanced Recovery  
 Gas Storage  Observation  
 Other:

20. List Electric Log Run: Platform Express Den, Neu, DSI, Micro *CBL*

CASING, LINER and CEMENT

21. Submit contractor's cement job summary for each string cemented

String	Hole Size	Csg/Liner Size	Csg/Liner Wt (Lbs.)	Csg/Liner Top	Csg/Tool Setting Depth	No. of Sacks	Cement Interval		Identify Method	
							Top	Bottom	CBL	Calc
SURF	17 1/2"	16"	84#	0'	55'	100	0'	55'	<input type="checkbox"/>	XX
SURF	12 1/4"	8 5/8"	24#	0'	2966'	1414	0'	2966'	<input type="checkbox"/>	XX
Stage Cement										
PROD	7 7/8"	4 1/2"	11.6#	0'	7900'	1031 *	3560'	7900'	XX	<input type="checkbox"/>
Stage Cement										
PROD CMT: 50/50 poz										
Stage Cement										

22. FORMATION LOG INTERVALS and TEST ZONES

Formation	Measured Depth		Check if applies		Comments
	Top	Bottom	DST	Cored	
FT UNION	2923'		<input type="checkbox"/>	<input type="checkbox"/>	
WILLIAMS FK	4420'		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	7218'		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7692'		<input type="checkbox"/>	<input type="checkbox"/>	
DRILLERS TD	7907'		<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

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

Print Name: Alan H. Smith  
 Signed: *Alan H. Smith* Title: Geologist Date: 9/5/01