

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:

401734100

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 05-045-23803-00

County: GARFIELD

Well Name: CC

Well Number: 0697-03-12E

Location: QtrQtr: Lot 11 Section: 3 Township: 6S Range: 97W Meridian: 6

Footage at surface: Distance: 2209 feet Direction: FNL Distance: 2344 feet Direction: FEL

As Drilled Latitude: 39.558317 As Drilled Longitude: -108.205107

GPS Data:

Date of Measurement: 06/23/2017 PDOP Reading: 1.8 GPS Instrument Operator's Name: T SHERILL

** If directional footage at Top of Prod. Zone Dist.: 2861 feet. Direction: FNL Dist.: 1340 feet. Direction: FEL

Sec: 3 Twp: 6S Rng: 97W

** If directional footage at Bottom Hole Dist.: 2861 feet. Direction: FNL Dist.: 1340 feet. Direction: FEL

Sec: 3 Twp: 6S Rng: 97W

Field Name: GRAND VALLEY

Field Number: 31290

Federal, Indian or State Lease Number: COC79101

Spud Date: (when the 1st bit hit the dirt) 05/27/2018 Date TD: 06/01/2018 Date Casing Set or D&A: 06/02/2018

Rig Release Date: 08/15/2018 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 9772 TVD** 9667 Plug Back Total Depth MD 9676 TVD** 9571

Elevations GR 8428 KB 8458 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

GR, 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	18	47.44	0	110	100	0	110	VISU
SURF	14+3/4	9+5/8	36	0	2,556	1,307	234	2,556	VISU
1ST	8+3/4	4+1/2	11.6	0	9,762	1,732	2,104	9,762	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 05/29/2018

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	SURF	2,556	155	0	234

Details of work:

TOP OUT JOB 33 BBLS (155 SXS) 15.6 PPG NEAT CEM. CEMENT TO SURF. CEMENT DID NOT FALL AFTER 1 HOUR. 1 TOP JOB REQUIRED

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	6,622				
WILLIAMS FORK	6,852				
CAMEO	9,102				
ROLLINS	9,499				

Comment:

NO OH LOGS WERE RUN ON THIS WELL. THE DIRECTIONAL COMPANY - QES - RAN A GR AND ROP LOG. OH LOGS WERE RUN ON THE CC 03-13W (API# 0504523794) AND THE CC 03-17W (API# 0504523815).

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>					
401759702	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
401759696	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>					
401747415	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401747416	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401747417	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401759670	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401759672	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401759673	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401759693	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401759699	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401763384	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401773485	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401773487	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401773488	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401776043	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)