

FORM
5Rev
09/14State 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:

401735280

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 05-045-23794-00

County: GARFIELD

Well Name: CC

Well Number: 0697-03-13W

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

Footage at surface: Distance: 2215 feet Direction: FNL Distance: 2356 feet Direction: FEL

As Drilled Latitude: 39.558329 As Drilled Longitude: -108.205142

GPS Data:

Date of Measurement: 06/23/2017 PDOP Reading: 1.2 GPS Instrument Operator's Name: T SHERRILL

** If directional footage at Top of Prod. Zone Dist.: 3084 feet. Direction: FNL Dist.: 1312 feet. Direction: FWL

Sec: 3 Twp: 6S Rng: 97W

** If directional footage at Bottom Hole Dist.: 3084 feet. Direction: FNL Dist.: 1312 feet. Direction: FWL

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) 06/11/2018 Date TD: 06/15/2018 Date Casing Set or D&A: 06/17/2018

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 9739 TVD** 9496 Plug Back Total Depth MD 9644 TVD** 9401

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

List Electric Logs Run:

TRIPLE COMBO, POROSITY, RESISTIVITY, CALIPER, 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	2,575	1,307	148	2,575	VISU
1ST	8+3/4	4+1/2	11.6	0	9,729	1,680	2,664	9,729	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 06/13/2018

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	SURF	2,575	101	0	148

Details of work:

TOP OUT JOB PUMPED 21.4 BBLS (101 SXS) 15.6 PPG NEAT CEMENT. CEMENT TO SURF. DID NOT FALL. 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	6,563				
WILLIAMS FORK	6,817				
CAMEO	9,067				
ROLLINS	9,490				

Comment:

THIS WELL WAS OH LOGGED. ONE SET OF OH LOGS RAN FROM 0' TO SURFACE CASING. THE OTHER SET FROM SURFACE CASING TO TD. THE OTHER WELL ON THIS PAD THAT WAS OH LOGGED WAS 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>					
401762051	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
401762048	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>					
401735326	PDF-CALIPER	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735327	PDF-CALIPER	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735328	PDF-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735330	PDF-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735334	LAS-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735338	PDF-CALIPER	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735339	PDF-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735341	LAS-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735342	PDF-POROSITY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735344	PDF-RESISTIVITY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735346	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735347	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735349	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735350	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735351	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735354	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735364	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735366	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735367	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735370	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735376	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735377	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735378	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735379	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401735779	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401747429	RESISTIVITY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401762044	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401762050	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
--	--	------------------------

Total: 0 comment(s)