

**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:  
401913023

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: 96850 Contact Name: Jeff Kirtland  
 Name of Operator: TEP ROCKY MOUNTAIN LLC Phone: (970) 263-2736  
 Address: PO BOX 370 Fax: \_\_\_\_\_  
 City: PARACHUTE State: CO Zip: 81635

API Number 05-045-23944-00 County: GARFIELD  
 Well Name: 5-MILE RANCH Well Number: SG 23-26  
 Location: QtrQtr: LOT 6 Section: 26 Township: 7S Range: 96W Meridian: 6  
 Footage at surface: Distance: 1822 feet Direction: FNL Distance: 2374 feet Direction: FEL  
 As Drilled Latitude: 39.410692 As Drilled Longitude: -108.075763

GPS Data:  
 Date of Measurement: 09/13/2018 PDOP Reading: 1.7 GPS Instrument Operator's Name: J. Kirkpatrick

\*\* If directional footage at Top of Prod. Zone Dist.: 2485 feet. Direction: FSL Dist.: 2467 feet. Direction: FWL  
 Sec: 26 Twp: 7S Rng: 96W

\*\* If directional footage at Bottom Hole Dist.: 2479 feet. Direction: FSL Dist.: 2432 feet. Direction: FWL  
 Sec: 26 Twp: 7S Rng: 96W

Field Name: GRAND VALLEY Field Number: 31290  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 11/20/2018 Date TD: 11/22/2018 Date Casing Set or D&A: 11/23/2018  
 Rig Release Date: 11/23/2018 Per Rule 308A.b.

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

Total Depth MD 5426 TVD\*\* 5152 Plug Back Total Depth MD 5374 TVD\*\* 5100

Elevations GR 5076 KB 5100 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
CBL, NEU, (TRIPLE COMBO IN API 045-15385)

**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	108	180	0	108	VISU
SURF	13+1/2	9+5/8	32.3	0	1,033	275	0	1,043	VISU
1ST	8+3/4	4+1/2	11.6	0	5,416	1,000	1,834	5,426	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	
WASATCH G	675				
MESAVERDE	2,480				The Ohio Creek Top is the Mesaverde Top.
OHIO CREEK	2,480				The Mesaverde Top is the Ohio Creek Top.
WILLIAMS FORK	2,557				
CAMEO	4,851				

Comment:

The GPS "as drilled" coordinates and dates of measurement is actual data of the existing well conductor location prior to the spud date.

No open hole resistivity with gamma ray log run per approved Open Hole Logging Exception.  
Triple Combination Logs were run on the Specialty Restaurants SG 522-26 API (045-15385)

No MUD logs were run on this well.

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

Signed: \_\_\_\_\_ Print Name: Ashley Noonan

Title: Sr. Regulatory Analyst Date: \_\_\_\_\_ Email: anoonan@terraep.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
401914904	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401915640	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"/>
<b>Other Attachments</b>			
401913099	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401913101	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401913104	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401913105	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401914129	DIRECTIONAL DATA	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)

