

DRILLING COMPLETION REPORT

Document Number:
401971513

Date Received:

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: Joan Proulx
 Name of Operator: LARAMIE ENERGY LLC Phone: (970) 263-3641
 Address: 1401 SEVENTEENTH STREET #1401 Fax: _____
 City: DENVER State: CO Zip: 80202

API Number 05-077-10573-00 County: MESA
 Well Name: Sup & Shep Well Number: 0993-25-10W
 Location: QtrQtr: NESW Section: 25 Township: 9S Range: 93W Meridian: 6
 Footage at surface: Distance: 2385 feet Direction: FSL Distance: 1748 feet Direction: FWL
 As Drilled Latitude: 39.244786 As Drilled Longitude: -107.723444

GPS Data:
 Date of Measurement: 10/11/2018 PDOP Reading: 1.4 GPS Instrument Operator's Name: T Sherrill

** If directional footage at Top of Prod. Zone Dist.: 2436 feet. Direction: FNL Dist.: 1506 feet. Direction: FWL
 Sec: 25 Twp: 9S Rng: 93W
 ** If directional footage at Bottom Hole Dist.: 249 feet. Direction: FNL Dist.: 1482 feet. Direction: FWL
 Sec: 25 Twp: 9S Rng: 93W

Field Name: BUZZARD CREEK Field Number: 9500
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 11/07/2018 Date TD: 11/11/2018 Date Casing Set or D&A: 11/11/2018
 Rig Release Date: 01/29/2019 Per Rule 308A.b.

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

Total Depth MD 8627 TVD** 8590 Plug Back Total Depth MD 8532 TVD** 8530
 Elevations GR 8078 KB 8108 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
RPM, CBL, Pulsed Neutron, 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	16	112	0	80	100	0	80	VISU
SURF	11	8+5/8	24	0	1,497	306	0	1,497	CALC
1ST	7+7/8	4+1/2	11.6	0	8,617	1,274	1,852	8,617	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	3,329	5,814	NO	NO	
WILLIAMS FORK	5,814	7,734	NO	NO	
CAMEO	7,734	8,402	NO	NO	
ROLLINS	8,402		NO	NO	

Comment:

As-built data was obtained at the conductors.

No open-hole logs were run on this well; a Rule 317.p. exception was granted for this well. The existing Sup & Shep Federal 25-11M (077-10219) well on this location meets the obligation of Rule 317.p. and will be used to describe the stratigraphy of the formations on this pad (Borehole and CAL/GR/NEU/IND). An open-hole log (GR/CAL/IND/NEU) was also run on the Sup & Shep Federal 0993-25-14W (077-10582) well.

TPZ determined by actual top perf at 6882'.

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

Signed: _____

Print Name: Joan Proulx

Title: Regulatory Analyst

Date: _____

Email: jproulx@laramie-energy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401971522	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401971518	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			
401971521	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971525	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971526	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971534	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971535	TIF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971537	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971542	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971543	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971544	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971546	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971549	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971558	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971559	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401971560	LAS-CEMENT BOND	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)

