

FORM
5

Rev
10/14

State of Colorado Oil and Gas Conservation Commission

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



Document Number:

402078216

Date Received:

07/01/2019

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and/or cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type Final completion Preliminary completion

OGCC Operator Number: 81490 Contact Name: ANDY PETERSON
 Name of Operator: ST CROIX OPERATING INC Phone: (970) 203-4263
 Address: P O BOX 13799 Fax: _____
 City: DENVER State: CO Zip: 80201 Email: paul.gottlob@iptenergyservices.com

API Number 05-121-11085-00 County: WASHINGTON
 Well Name: ROCKY Well Number: 1
 Location: QtrQtr: NWNW Section: 8 Township: 3S Range: 50W Meridian: 6
 FNL/FSL _____ FEL/FWL _____
 Footage at surface: Distance: 600 feet Direction: FNL Distance: 1100 feet Direction: FWL
 As Drilled Latitude: 39.814150 As Drilled Longitude: -103.006250

GPS Data:
 Date of Measurement: 06/25/2019 PDOP Reading: 2.7 GPS Instrument Operator's Name: CRAIG BURKE
 FNL/FSL _____ FEL/FWL _____

** If directional footage at Top of Prod. Zone Dist: _____ feet Direction: _____ Dist: _____ feet Direction: _____
 Sec: _____ Twp: _____ Rng: _____
 FNL/FSL _____ FEL/FWL _____

** If directional footage at Bottom Hole Dist: _____ feet Direction: _____ Dist: _____ feet Direction: _____
 Sec: _____ Twp: _____ Rng: _____

Field Name: WILDCAT Field Number: 99999

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 06/12/2019 Date TD: 06/16/2019 Date Casing Set or D&A: 06/18/2019

Rig Release Date: 06/18/2019 Per Rule 308A.b.

Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 4100 TVD** _____ Plug Back Total Depth MD _____ TVD** _____

Elevations GR 4533 KB 4538 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:

Mud, Triple Combo, Ind

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 |
|-------------|--------------|----------------|-------|---------------|---------------|-----------|---------|---------|--------|
| SURF | 12+1/4 | 8+5/8 | 24 | 0 | 491 | 300 | 0 | 300 | VISU |
| OPEN HOLE | 7+7/8 | | | 300 | 4,100 | | | | |

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 | |
| NIOBRARA | 3,006 | | NO | NO | |
| FORT HAYS | 3,445 | | NO | NO | |
| D SAND | 3,905 | | NO | NO | |
| J SAND | 3,960 | | NO | NO | |

Operator Comments:

Well was drilled and PA.

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

Signed: _____

Print Name: PAUL GOTTLÖB

Title: Regulatory & Engin. Tech.

Date: 7/1/2019

Email: paul.gottlob@iptenergyservices.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|------------------------|---|--|
| <u>Attachment Checklist</u> | | | |
| 402078241 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| | Directional Survey ** | Yes <input type="checkbox"/> | No <input checked="" 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> | | | |
| 402078216 | FORM 5 SUBMITTED | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 402079068 | PDF-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 402088918 | LAS-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 402089284 | PDF-TRIPLE COMBINATION | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 402089289 | LAS-COMPOSITE | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 402093120 | PDF-INDUCTION | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|-------------------|---|---------------------|
| Engineer | Top of 7.875" open hole is surface casing setting depth 491'. | 10/10/2019 |
| Permit | Logs have been updated by operator. | 07/01/2019 |
| Permit | Triple combo log .pdf is incomplete. Returned to draft. | 07/01/2019 |

Total: 3 comment(s)

