

**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:  
402114515  
  
Date Received:

**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: 10299 Contact Name: Jake Flora  
 Name of Operator: KUENZLER & FLORA RESERVE COMPANY Phone: (720) 988-5375  
 Address: 3310 W AQUEDUCT AVE Fax: \_\_\_\_\_  
 City: LITTLETON State: CO Zip: 80123 Email: jakeflora@kfrcorp.com

API Number 05-061-06891-00 County: KIOWA  
 Well Name: Baughman Well Number: 2  
 Location: QtrQtr: SESW Section: 32 Township: 18S Range: 44W Meridian: 6  
 FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_  
 Footage at surface: Distance: 606 feet Direction: FSL Distance: 2107 feet Direction: FWL  
 As Drilled Latitude: 38.442780 As Drilled Longitude: -102.374550  
 GPS Data:  
 Date of Measurement: 09/27/2019 PDOP Reading: 2.2 GPS Instrument Operator's Name: Elijah Frane  
 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: SHERIDAN LAKE Field Number: 77350  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 07/12/2019 Date TD: 07/15/2019 Date Casing Set or D&A: 07/16/2019  
 Rig Release Date: 07/16/2019 Per Rule 308A.b.

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

Total Depth MD 4178 TVD\*\* \_\_\_\_\_ Plug Back Total Depth MD 4178 TVD\*\* \_\_\_\_\_  
 Elevations GR 4044 KB 4049 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
NEUTRON DENSITY POROSITY, INDUCTION, CBL

**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	346	225	0	300	VISU
1ST	7+7/8	5+1/2	20	0	4,171	125	265	4,171	CBL

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 07/29/2019

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
STAGE TOOL	1ST	1,647	150	265	1,670

Details of work:

MIRU workover rig, TIH w 2-7/8" TBG, PC shifting tool, open port collar, pump 150 sx cement behind casing, TOO, SDFN.

## 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	
DAKOTA	1,027		NO	NO	
STONE CORRAL	2,468		NO	NO	
NEVA	3,184		NO	NO	
SHAWNEE	3,660		NO	NO	
LANSING	3,910		NO	NO	

Operator Comments:

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

Signed: \_\_\_\_\_

Print Name: Jake Flora

Title: Petroleum Engineer

Date: \_\_\_\_\_

Email: jakeflora@kfrcorp.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402141479	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>			
402134984	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402134987	LAS-IND-DENS-NEU	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402204438	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402228094	PDF-DUAL INDUCTION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402228102	PDF-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Missing well logs. Returned to draft.	10/30/2019

Total: 1 comment(s)

