

FORM
5

Rev
02/20

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:

401554590

Date Received:

02/26/2018

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: 74165 Contact Name: Edward Ingve
Name of Operator: RENEGADE OIL & GAS COMPANY LLC Phone: (303) 829-2354
Address: 6155 S MAIN STREET #210 Fax: (303) 680-4907
City: AURORA State: CO Zip: 80016 Email: ed@renegadeoilandgas.com

API Number 05-005-06928-00 County: ARAPAHOE
Well Name: COX Well Number: 1-8
Location: QtrQtr: NESW Section: 8 Township: 5S Range: 62W Meridian: 6
FNL/FSL FEL/FWL
Footage at surface: Distance: 1980 feet Direction: FSL Distance: 1980 feet Direction: FWL
As Drilled Latitude: 39.627960 As Drilled Longitude: -104.353680
GPS Data: GPS Quality Value: 3.1 Type of GPS Quality Value: PDOP Date of Measurement: 09/29/2010
GPS Instrument Operator's Name: Keith Westfall 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: DRAGOON Field Number: 18850
Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 08/15/1985 Date TD: 08/22/1985 Date Casing Set or D&A: 08/24/1985
Rig Release Date: 08/24/1985 Per Rule 308A.b.

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

Total Depth MD 7585 TVD** _____ Plug Back Total Depth MD 7552 TVD** _____
Elevations GR 5601 KB 5611 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
DIL, DEN/NEU, GR, 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	219	175	0	175	VISU
1ST	7+7/8	4+1/2	10.5&11.6	0	7,587	200	6,930	7,587	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 10/12/2010

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
1 INCH	1ST	700	180	175	710
SQUEEZE	1ST	2,677	650	2,010	2,755
STAGE TOOL	1ST	1,439	100	990	1,475
SQUEEZE	1ST	2,600	50		

Details of work:

10/3/1985 - Initial completion work indicated sliding sleeve at 1439' opened and 100 sacks Halco Lite placed. Sleeve closed and pressure tested successfully. CBL from 10/11/2010 indicated cement placed from 990' to 1475'.
 10/12/2010 - On the same day 180 sacks was placed via 700 feet of 1" tubing down bradenhead and 650 sacks were squeezed down 4 1/2" production casing to repair casing from 2419' to 2677'. CBL from 10/28/2010 indicated cement placement from 2010' to 2755'.
 10/20/2010 - A 50 sack balanced plug was placed accross the interval of pipe from 2700' to 1900' and displaced with 5+ barrels. Coverage of this job is included in the CBL placement from the 10/28/2010 log.

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	

Operator Comments:

Form 5 is being submitted for the Cox #1-8 as a result of a file review which was undertaken because of a recent workover. Cement work which took place in 10/2010 was never fully documented after finalized. A Form 4 for proposed work was faxed to Stewart Allsworth on 10/11/2010 but never posted to the well's document history. A field inspection report from Jim Precup of the COGCC has been attached to this Form 5 as confirmation of the work performed. There is no electronic copy of the CBL run after cementing so a paper copy is being submitted.

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

Signed: _____ Print Name: Edward Ingve

Title: Manager/Owner Date: 2/26/2018 Email: ed@renegadeoilandgas.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
401554927	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401554929	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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
401554590	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401555276	OPERATIONS SUMMARY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	Corrected logs run abbreviation and passed engineering review	03/03/2020
Permit	Pass	12/19/2018

Total: 2 comment(s)

