

FORM
5Rev
12/20

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:

402782080

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: 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

Email: jkirtland@terraep.com

API Number 05-103-12474-00

County: RIO BLANCO

Well Name: FEDERAL

Well Number: RG 343-18-297

Location: QtrQtr: NWNE

Section: 18

Township: 2S

Range: 97W

Meridian: 6

FNL/FSL

FEL/FWL

Footage at surface: Distance: 684 feet

Direction: FNL Distance: 2115 feet

Direction: FEL

As Drilled Latitude: 39.881747

As Drilled Longitude: -108.322778

GPS Data: GPS Quality Value: 2.4

Type of GPS Quality Value: PDOP

Date of Measurement: 12/24/2020

FNL/FSL

FEL/FWL

** If directional footage at Top of Prod. Zone

Dist: 2556 feet

Direction: FSL

Dist: 740 feet

Direction: FEL

Sec: 18

Twp: 2S

Rng: 97W

FNL/FSL

FEL/FWL

** If directional footage at Bottom Hole

Dist: 2302 feet

Direction: FSL

Dist: 744 feet

Direction: FEL

Sec: 18

Twp: 2S

Rng: 97W

Field Name: SULPHUR CREEK

Field Number: 80090

Federal, Indian or State Lease Number: COC0003453

Spud Date: (when the 1st bit hit the dirt) 03/07/2021

Date TD: 04/18/2021

Date Casing Set or D&A: 04/19/2021

Rig Release Date: 07/28/2021 Per Rule 308A.b.

Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 12186

TVD** 11733

Plug Back Total Depth MD 12140

TVD** 11687

Elevations GR 6621

KB 6651

Digital Copies of ALL Logs must be Attached

☒

List All Logs Run:

CBL, NEU, (DEN/NEU in 103-10906)

FLUID VOLUMES USED IN DRILLING OPERATIONS

(Enter "0" if a type of a fluid was not used. Do not leave blank.)

Total Fluids (bbls): 5389

Fresh Water (bbls): 8518

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 3129

CASING, LINER AND CEMENT

<u>Casing Type</u>	<u>Size of Hole</u>	<u>Size of Casing</u>	<u>Grade</u>	<u>Wt/Ft</u>	<u>Csg/Liner Top</u>	<u>Setting Depth</u>	<u>Sacks Cmt</u>	<u>Cmt Btm</u>	<u>Cmt Top</u>	<u>Status</u>
CONDUCTOR	30	20	X65	78.67	0	84	199	84	0	VISU
SURF	17+1/2	13+3/8	J-55	54.5	0	1438	536	1438	0	VISU
1ST	12+1/4	9+5/8	J-55	36	0	3275	221	3275	2262	CBL
2ND	8+1/2	4+1/2	P-110	11.6	0	12176	1823	12186	3071	CBL

Bradenhead Pressure Action Threshold 431 psig

This threshold is calculated per Rule 308A.b.(2)G. If this well is located in a bradenhead test area (see Rule 207.b) per an Order of the Commission, it may be subject to a different threshold.

Does the casing centralization comply with Rule 317.g? Yes

If "NO", provide details below.

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	2,703				
WASATCH G	5,360				
OHIO CREEK	7,205				
WILLIAMS FORK	8,000				
CAMEO	10,673				
ROLLINS	11,117				
COZZETTE	11,277				
CORCORAN	11,605				
SEGO	11,848				

Operator Comments:

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

No MUD logs were run on this well.

Alternative Logging Program: No open-hole logs were run. Open Hole Resistivity log ran on Well Federal RG 41-18-297D (API 05-103-10906)

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 ?	
Attachment Checklist			
402782091	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402782090	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			
402782083	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402782084	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402782085	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402782086	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402782087	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402782088	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402803942	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)