

FORM  
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Rev  
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:

402670318

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: <u>10456</u>	Contact Name: <u>Reed Haddock</u>
Name of Operator: <u>CAERUS PICEANCE LLC</u>	Phone: <u>(720) 880-6369</u>
Address: <u>1001 17TH STREET #1600</u>	Fax: <u>(303) 565-4606</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>rhaddock@caerusoilandgas.com</u>

API Number <u>05-103-12392-00</u>	County: <u>RIO BLANCO</u>
Well Name: <u>ELU J14 FED</u>	Well Number: <u>12B-14-496</u>
Location: QtrQtr: <u>NESW</u> Section: <u>14</u> Township: <u>4S</u> Range: <u>96W</u> Meridian: <u>6</u>	
	FNL/FSL <span style="float:right">FEL/FWL</span>
Footage at surface: Distance: <u>2025</u> feet Direction: <u>FSL</u> Distance: <u>2329</u> feet Direction: <u>FWL</u>	
As Drilled Latitude: <u>39.700881</u> As Drilled Longitude: <u>-108.136888</u>	
GPS Data: GPS Quality Value: <u>1.5</u> Type of GPS Quality Value: <u>PDOP</u> Date of Measurement: <u>06/17/2021</u>	
	FNL/FSL <span style="float:right">FEL/FWL</span>
** If directional footage at Top of Prod. Zone Dist: <u>1270</u> feet Direction: <u>FNL</u> Dist: <u>1296</u> feet Direction: <u>FWL</u>	
Sec: <u>14</u> Twp: <u>4S</u> Rng: <u>96W</u>	
	FNL/FSL <span style="float:right">FEL/FWL</span>
** If directional footage at Bottom Hole Dist: <u>1355</u> feet Direction: <u>FNL</u> Dist: <u>1245</u> feet Direction: <u>FWL</u>	
Sec: <u>14</u> Twp: <u>4S</u> Rng: <u>96W</u>	
Field Name: <u>GRAND VALLEY</u> Field Number: <u>31290</u>	
Federal, Indian or State Lease Number: <u>COC057684</u>	

Spud Date: (when the 1st bit hit the dirt) 04/28/2021 Date TD: 05/06/2021 Date Casing Set or D&A: 05/07/2021  
Rig Release Date: 05/08/2021 Per Rule 308A.b.

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

Total Depth MD <u>12480</u> TVD** <u>12179</u> Plug Back Total Depth MD <u>12413</u> TVD** <u>12112</u>
Elevations GR <u>7904</u> KB <u>7934</u> <b>Digital Copies of ALL Logs must be Attached</b> <input type="checkbox"/>

List All Logs Run:  
PNL, CBL

**FLUID VOLUMES USED IN DRILLING OPERATIONS**  
(Enter "0" if a type of a fluid was not used. Do not leave blank.)

Total Fluids (bbls): 10890 Fresh Water (bbls): 10890  
Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 0

### CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Grade	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top	Status
CONDUCTOR	30	20	A252	54#	0	100	218	100	0	VISU
SURF	14+3/4	9+5/8	J55	36#	0	3524	1241	3524	0	VISU
1ST	8+3/4	4+1/2	HCP110	11.6#	0	12460	1671	12460	4470	CBL

Bradenhead Pressure Action Threshold 1057 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: 04/30/2021

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	SURF	0	1,241	0	3,524

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	
GREEN RIVER	0	3,503	NO	NO	
WASATCH	3,503	6,031	NO	NO	
WASATCH G	6,031	6,595	NO	NO	
FORT UNION	6,595	8,507	NO	NO	
OHIO CREEK	8,507	9,103	NO	NO	
WILLIAMS FORK	9,103	11,761	NO	NO	
CAMEO	11,761	12,453	NO	NO	
ROLLINS	12,453		NO	NO	

Operator Comments:

All casing and cement information and formation tops are measured from KB. Per the approved Form 2 APD for the subject well, one gamma ray and one resistivity log was required for this multi-well pad. Please refer to the open hole logs submitted with the ELU J14 FED 21B-14-496 (API# 05-103-12383).  
This wellbore also had OH logs run. This well was completed in September 2021. The rig will be on the J14 Pad until December 2021.

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

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

Print Name: Reed Haddock

Title: Regulatory Lead

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

Email: rhaddock@caerusoilandgas.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
402678256	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402681914	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"/>
<b>Other Attachments</b>			
402681916	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402759302	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402771919	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402771920	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402771922	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402826926	PDF-PULSED NEUTRON	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)