

FORM
5Rev
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:

402514177

Date Received:

10/19/2020

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: 14855

Contact Name: Conner Staley

Name of Operator: CENTRAL OPERATING INC

Phone: (303) 8949576

Address: 1600 BROADWAY STE 1050

Fax:

City: DENVER

State: CO

Zip: 80202

Email: coidenverproduction@gmail.com

API Number 05-121-08988-00

County: WASHINGTON

Well Name: STATE

Well Number: 3

Location: QtrQtr: NWSW

Section: 36

Township: 3S

Range: 51W

Meridian: 6

FNL/FSL

FEL/FWL

Footage at surface: Distance: 2050 feet

Direction: FSL

Distance: 800 feet

Direction: FWL

As Drilled Latitude:

As Drilled Longitude:

GPS Data: GPS Quality Value:

Type of GPS Quality Value:

Date of Measurement:

GPS Instrument Operator's Name:

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: STIRRUP

Field Number: 79380

Federal, Indian or State Lease Number: CO 68/4808-S

Spud Date: (when the 1st bit hit the dirt) 05/03/1975

Date TD: 05/06/1975

Date Casing Set or D&A: 09/24/2020

Rig Release Date: 10/06/2020 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 4035

TVD**

Plug Back Total Depth MD 3934

TVD**

Elevations GR 4606

KB 4615

Digital Copies of ALL Logs must be Attached per Rule 308A

☒

List Electric Logs Run:

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
2ND	5+1/2	4+1/2	14.6	0	3,700	200	0	3,700	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 09/24/2020

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	

Operator Comments:

9/24/2020 - Ran 4-1/2 liner to 3,700'. Mix and pump 120 sx 24.57 bbl 14.5lb cement and displace, shut-in. COGCC Rep Susan Sherman Witness. Mix & pump 80 sx 16.38 down 5-1/2" casing from surface & shut-in. COGCC Rep Susan Sherman Witness.

9/25/2020 - MIT well witnessed by COGCC Rep Susan Sherman. See attached Form 21. See attached CBL.

This report is for a subsequently approved workover (liner run). This is the 30 day report. A follow-up Bradenhead test will follow.

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

Signed: _____

Print Name: Conner Staley

Title: Engineer

Date: 10/19/2020

Email: coidenverproduction@gmail.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
402514260	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"/>
402514240	Other	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
<u>Other Attachments</u>					
402514177	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402514228	PDF-CBL 1ST RUN	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Engineer	Form 21 not filed, emailed to Operator for submittal by 1/31/2023. 2022 Bradenhead test due asap with updated wellbore diagram.	01/18/2023

Total: 1 comment(s)