

FORM 5 Rev 12/20



Document Number: 403885470 Date Received: 03/11/2025

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 [X] Final completion [] Preliminary completion

ECMC Operator Number: 10433 Contact Name: Lori Muhr Name of Operator: LARAMIE ENERGY LLC Phone: (970) 312-6479 Address: 1700 LINCOLN ST STE 3950 Fax: City: DENVER State: CO Zip: 80203 Email: LMuhr@Laramie-Energy.com

API Number 05-045-24077-00 County: GARFIELD Well Name: CC Well Number: 0697-03-21E Location: QtrQtr: NESW Section: 3 Township: 6S Range: 97W Meridian: 6 Footage at surface: Distance: 1598 feet Direction: FSL Distance: 1517 feet Direction: FWL As Drilled Latitude: 39.549072 As Drilled Longitude: -108.210098 GPS Data: GPS Quality Value: 1.4 Type of GPS Quality Value: PDOP Date of Measurement: 11/04/2020

** If directional footage at Top of Prod. Zone Dist: 2122 feet Direction: FSL Dist: 697 feet Direction: FEL Sec: 3 Twp: 6S Rng: 97W ** If directional footage at Bottom Hole Dist: 2072 feet Direction: FSL Dist: 737 feet Direction: FEL Sec: 3 Twp: 6S Rng: 97W

Field Name: GRAND VALLEY Field Number: 31290 Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 08/16/2024 Date TD: 08/20/2024 Date Casing Set or D&A: 08/21/2024 Rig Release Date: 11/06/2024 Per Rule 308A.b.

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

Total Depth MD 10415 TVD** 9696 Plug Back Total Depth MD 10347 TVD** 9628 Elevations GR 8610 KB 8640 Digital Copies of ALL Logs must be Attached []

List All Logs Run: Mud Log, CBL, CNL, (RES in API 045-24083)

FLUID VOLUMES USED IN DRILLING OPERATIONS (Enter "0" if a type of a fluid was not used. Do not leave blank.) Total Fluids (bbls): 580 Fresh Water (bbls): 580 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	26	18	NA	47.4	0	110	185	110	0	VISU
SURF	14+3/4	9+5/8	J55	36	0	2609	1092	2609	0	VISU
1ST	8+3/4	4+1/2	P110	11.6	0	10395	1380	10395	1384	CBL

Bradenhead Pressure Action Threshold 783 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
1 INCH	SURF		424	0	30

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 ECMC)
	Top	Bottom	DST	Cored	
WASATCH	3,370	5,675	NO	NO	
WASATCH G	5,675	5,912	NO	NO	
FORT UNION	5,912	7,349	NO	NO	
OHIO CREEK	7,349	7,590	NO	NO	
WILLIAMS FORK	7,590	9,732	NO	NO	
CAMEO	9,732	10,136	NO	NO	
CAMEO COAL	10,136	10,228	NO	NO	
ROLLINS	10,228	10,415	NO	NO	

Operator Comments:

No Open Hole logs were run on this well. Open hole log was ran on CC 0697-03-22W (API 045-24083)

TPZ is as drilled.

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

Signed: _____

Print Name: Lori Muhr

Title: Regulatory Analyst

Date: 3/11/2025

Email: LMuhr@Laramie-Energy.com

ATTACHMENT LIST

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
403995027	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403995028	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
404048699	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404048700	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"/>
<u>Other Attachments</u>			
2483811	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
2483813	Directional Survey Plan Profile	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403885470	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404020496	PDF-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404020499	LAS-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404020515	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404020746	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404048708	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404122625	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404122626	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	Modified total fluids. Corrected data on the topout tab, per op email adding 424 sacks with top and bottom of cmt to match surface casing report. Attached WBD and Plan Profile. Engineer review completed and passed 06/08/25.	05/29/2025
Permit	Added 0 to blank total fluids Passed completion review	03/11/2025

Total: 2 comment(s)