

FORM
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Rev
12/20

State of Colorado

Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

404184531

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

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 05-077-10026-00 County: MESA
Well Name: BCU Well Number: 0993-14-04W
Location: QtrQtr: SWSW Section: 14 Township: 9S Range: 93W Meridian: 6
Footage at surface: Distance: 1220 feet Direction: FSL Distance: 558 feet Direction: FWL
As Drilled Latitude: 39.272682 As Drilled Longitude: -107.744895
GPS Data: GPS Quality Value: 1.3 Type of GPS Quality Value: PDOP Date of Measurement: 07/07/2022
** If directional footage at Top of Prod. Zone Dist: 1197 feet Direction: FNL Dist: 990 feet Direction: FWL
** If directional footage at Bottom Hole Dist: 1115 feet Direction: FNL Dist: 948 feet Direction: FWL
Field Name: BUZZARD CREEK Field Number: 9500
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 02/16/2025 Date TD: 03/10/2025 Date Casing Set or D&A: 03/11/2025
Rig Release Date: 04/09/2025 Per Rule 308A.b.

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

Total Depth MD 8354 TVD** 7980 Plug Back Total Depth MD 8666 TVD** 8292
Elevations GR 7394 KB 7424 Digital Copies of ALL Logs must be Attached

List All Logs Run:
CNL, RBL (Res is API 077-10038 and 077-10610)

FLUID VOLUMES USED IN DRILLING OPERATIONS
(Enter "0" if a type of a fluid was not used. Do not leave blank.)
Total Fluids (bbls): 2200 Fresh Water (bbls): 2200
Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 0

Recycled Produced Water Alternative (bbls): 0

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	26	16	SA53B	36.94	0	110	150	110	0	VISU
SURF	11	8+5/8	J-55	24	0	1587	271	1587	0	VISU
1ST	7+7/8	4+1/2	HCP110	11.6	0	8714	1022	8714	1750	CBL

Bradenhead Pressure Action Threshold 476 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: _____

<u>Method used</u>	<u>String</u>	<u>Cementing tool setting/perf depth</u>	<u>Cement volume</u>	<u>Cement top</u>	<u>Cement bottom</u>

Details of work:

FORMATION LOG INTERVALS AND TEST ZONES

<u>FORMATION NAME</u>	<u>Measured Depth</u>		<u>Check if applies</u>		<u>COMMENTS (All DST and Core Analysis must be submitted to ECMC)</u>
	<u>Top</u>	<u>Bottom</u>	<u>DST</u>	<u>Cored</u>	
WASATCH G	2,794	3,430	NO	NO	
FORT UNION	3,430	4,970	NO	NO	
OHIO CREEK	4,970	5,499	NO	NO	
WILLIAMS FORK	5,499	7,313	NO	NO	
CAMEO	7,313	8,041	NO	NO	
CAMEO COAL	8,041	8,060	NO	NO	
ROLLINS	8,060	8,260	NO	NO	

Operator Comments:

TPZ is as drilled.

No open hole logs were run in this well. Res in API 077-10038 and 077-10610.

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: _____ Email: LMuhr@Laramie-Energy.com

ATTACHMENT LIST

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
404184610	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
404184606	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>			
404184600	LAS-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404184603	PDF-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404184604	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404184605	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404281602	DIRECTIONAL DATA	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)