

FORM  
5Rev  
02/08State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

1637968

## DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type ☐ Final completion ☒ Preliminary completion

1. OGCC Operator Number: 28600 4. Contact Name: BEATRICE SABALA  
2. Name of Operator: EXXON MOBIL CORPORATION Phone: (713) 431-1125  
3. Address: P O BOX 4358 Fax: (713) 431-1619  
City: HOUSTON State: TX Zip: 77210-43

5. API Number 05-103-11426-00 6. County: RIO BLANCO  
7. Well Name: FREEDOM UNIT Well Number: 197-33B4  
8. Location: QtrQtr: SWNE Section: 33 Township: 1S Range: 97W Meridian: 6  
Footage at surface: Direction: Distance: Direction: Distance:  
As Drilled Latitude: As Drilled Longitude:

## GPS Data:

Data of Measurement: PDOP Reading: GPS Instrument Operator's Name:

## \*\* If directional footage

at Top of Prod. Zone Distance: Direction: Distance: Direction:  
at Bottom Hole Distance: Direction: Distance: Direction:

9. Field Name: PICEANCE CREEK 10. Field Number: 68800

11. Federal, Indian or State Lease Number: COC60722

12. Spud Date: (when the 1st bit hit the dirt) 02/24/2010 13. Date TD: 03/09/2010 14. Date Casing Set or D&amp;A: 03/11/2010

## 15. Well Classification:

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

16. Total Depth MD 12371 TVD 12331 17 Plug Back Total Depth MD TVD

18. Elevations GR 6446 KB 6476 One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

## 19. List Electric Logs Run:

## 20. Casing, Liner and Cement:

## CASING

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
CONDUCTOR	26	16		120	96	120	0
SURF	14+3/4	10+3/4		4,386	1,150	4,386	1,345
1ST	6+1/8	4+1/2		12,355	2,489	12,355	4,586

## REMEDIAL CEMENT

Cement work date:

Details of work:

21. Formation log intervals and test zones:

**FORMATION LOG INTERVALS AND TEST ZONES**

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
CORCORAN			<input type="checkbox"/>	<input type="checkbox"/>	
COZZETTE			<input type="checkbox"/>	<input type="checkbox"/>	
OHIO CREEK			<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS			<input type="checkbox"/>	<input type="checkbox"/>	
WASATCH G			<input type="checkbox"/>	<input type="checkbox"/>	
WILLIAMS FORK - CAMEO			<input type="checkbox"/>	<input type="checkbox"/>	

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

Signed: \_\_\_\_\_ Print Name: Beatrice Sabala

Title: Tech Asst Date: 4/8/2010 Email: beatrice.sabala@exxonmobil.com

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: *David S. Nash* Director of COGCC Date: 6/21/2010

**Attachment Check List**

Att Doc Num	Name	Doc Description
1637968	FORM 5 SUBMITTED	LF@2480844 1637968
1637969	CMT SUMMARY	LF@2480845 1637969
1637970	CMT SUMMARY	LF@2480847 1637970
1637991	CORRESPONDENCE	LF@2493315 1637991

Total Attach: 4 Files