

FORM
5

Rev
02/08

State 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:

400097104

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: 10000 4. Contact Name: Kristina Lee
2. Name of Operator: BP AMERICA PRODUCTION COMPANY Phone: (303) 659-9581
3. Address: 501 WESTLAKE PARK BLVD Fax: (303) 659-8209
City: HOUSTON State: TX Zip: 77079

5. API Number 05-067-09690-00 6. County: LA PLATA
7. Well Name: PATRICK, GARU GU Well Number: 2
8. Location: QtrQtr: SWNW Section: 29 Township: 34N Range: 7W Meridian: M
Footage at surface: Direction: FNL Distance: 2491 Direction: FWL Distance: 1007
As Drilled Latitude: 37.162507 As Drilled Longitude: -107.637732

GPS Data:

Data of Measurement: 12/21/2009 PDOP Reading: 6.4 GPS Instrument Operator's Name: Bob Cress

** If directional footage

at Top of Prod. Zone Distance: 830 Direction: FSL Distance: 1047 Direction: FWL
Sec: 29 Twp: 34N Rng: 7W
at Bottom Hole Distance: 730 Direction: FSL Distance: 1044 Direction: FWL
Sec: 29 Twp: 34N Rng: 7W

9. Field Name: IGNACIO BLANCO 10. Field Number: 38300

11. Federal, Indian or State Lease Number: Fee

12. Spud Date: (when the 1st bit hit the dirt) 11/24/2009 13. Date TD: 11/28/2009 14. Date Casing Set or D&A: 11/27/2009

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 3892 TVD 3206 17 Plug Back Total Depth MD 3806 TVD _____

18. Elevations GR 6731 KB 6748

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:

CBL/RST

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							
SURF	12+1/4	8+5/8		479	350	490	
S.C. 1.1	7+7/8	5+1/2		3,882	395	3,883	

ADDITIONAL 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	
FRUITLAND COAL	3,403	3,654	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Logs were uploaded 5/4/2010. Directional reports and cement tickets were submitted with the preliminary form 5 12/23/2009

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

Signed: _____ Print Name: Kristina Lee

Title: Regulatory Consultant -BP Date: _____ Email: leeka@bp.com

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ **Director of COGCC** Date: _____