

**FORM
5**Rev
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:

400105365

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 05-067-09755-00

6. County: LA PLATA

7. Well Name: JAMES GU A

Well Number: 2

8. Location: QtrQtr: SESE Section: 30 Township: 34N Range: 7W Meridian: M

Footage at surface: Direction: FSL Distance: 154 Direction: FEL Distance: 827

As Drilled Latitude: 37.155209 As Drilled Longitude: -107.843963

GPS Data:

Data of Measurement: 02/03/2010 PDOP Reading: 2.7 GPS Instrument Operator's Name: Bob Cress

** If directional footage

at Top of Prod. Zone Distance: 2200 Direction: FSL Distance: 839 Direction: FEL

Sec: 30 Twp: 34N Rng: 7W

at Bottom Hole Distance: 2296 Direction: FSL Distance: 845 Direction: FEL

Sec: 30 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) 01/18/2010 13. Date TD: 01/19/2010 14. Date Casing Set or D&A: 01/18/2010

15. Well Classification:

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

16. Total Depth MD 3874 TVD 3097 17 Plug Back Total Depth MD 3820 TVD

18. Elevations GR 6843 KB 6660

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	13.5	423	300	453	0
1ST	7+7/8	5+1/2	15.5	3,863	390	3,864	0

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	3,386	3,641	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Logs were uploaded 5/4/2010 and cement and directional reports were submitted with preliminary form 5 on 2/8/2010.

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: _____