

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



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Document Number:

400107833

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 05-067-09678-00 6. County: LA PLATA
7. Well Name: MAESTAS GU A Well Number: 4
8. Location: QtrQtr: SWNE Section: 23 Township: 33N Range: 9W Meridian: N
Footage at surface: Direction: FNL Distance: 2298 Direction: FEL Distance: 1503
As Drilled Latitude: 37.090198 As Drilled Longitude: -107.791789

GPS Data:

Data of Measurement: 10/02/2009 PDOP Reading: 1.9 GPS Instrument Operator's Name: Bob Cress

** If directional footage

at Top of Prod. Zone Distance: 1484 Direction: FNL Distance: 816 Direction: FEL
Sec: 23 Twp: 33N Rng: 9W
at Bottom Hole Distance: 1438 Direction: FNL Distance: 788 Direction: FEL
Sec: 23 Twp: 33N Rng: 9W

9. Field Name: IGNACIO BLANCO 10. Field Number: 38300
11. Federal, Indian or State Lease Number: Fee/COC5614

12. Spud Date: (when the 1st bit hit the dirt) 08/10/2009 13. Date TD: 08/13/2009 14. Date Casing Set or D&A: 08/14/2009

15. Well Classification:

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

16. Total Depth MD 3604 TVD 3329 17 Plug Back Total Depth MD 3550 TVD

18. Elevations GR 6669 KB 6685 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 Bot	Cement Top	Status
SURF	12+1/4	8+5/8	28	391	300	401		
1ST	7+7/8	5+1/2	15.5	3,595	295	3,601		

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	2,951	3,374	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

This well is in Comm agreement COC-56145

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: _____