

**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



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**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.

Document Number:

2554492

Completion Type ☐ Final completion ☒ Preliminary completion

1. OGCC Operator Number: 16700 4. Contact Name: DIANE PETERSON  
2. Name of Operator: CHEVRON USA INC Phone: (970) 675-3842  
3. Address: 6001 BOLLINGER CANYON RD Fax: (970) 675-3800  
City: SAN RAMON State: CA Zip: 94583

5. API Number 05-103-11429-00 6. County: RIO BLANCO  
7. Well Name: MB LARSON C Well Number: 5  
8. Location: QtrQtr: SESE Section: 22 Township: 2N Range: 103W Meridian: 6  
Footage at surface: Direction: FSL Distance: 879 Direction: FEL Distance: 416  
As Drilled Latitude: 40.123711 As Drilled Longitude: -108.934517

## GPS Data:

Data of Measurement: 02/23/2009 PDOP Reading: 1.4 GPS Instrument Operator's Name: J FLOYD

## \*\* If directional footage

at Top of Prod. Zone Distance: \_\_\_\_\_ Direction: \_\_\_\_\_ Distance: \_\_\_\_\_ Direction: \_\_\_\_\_  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_  
at Bottom Hole Distance: \_\_\_\_\_ Direction: \_\_\_\_\_ Distance: \_\_\_\_\_ Direction: \_\_\_\_\_  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_

9. Field Name: RANGELY 10. Field Number: 72370  
11. Federal, Indian or State Lease Number: 053980

12. Spud Date: (when the 1st bit hit the dirt) 02/19/2009 13. Date TD: \_\_\_\_\_ 14. Date Casing Set or D&A: \_\_\_\_\_

## 15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 2092 TVD \_\_\_\_\_ 17 Plug Back Total Depth MD \_\_\_\_\_ TVD \_\_\_\_\_18. Elevations GR 5582 KB 5604

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:

NO LOGS RUN AT THIS TIME

## 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	9+5/8		2,067	800	2,067	0	CALC

### 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	
CARMEL			<input type="checkbox"/>	<input type="checkbox"/>	
CHINLE			<input type="checkbox"/>	<input type="checkbox"/>	
CURTIS			<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA			<input type="checkbox"/>	<input type="checkbox"/>	
ENTRADA			<input type="checkbox"/>	<input type="checkbox"/>	
MOENKOPI			<input type="checkbox"/>	<input type="checkbox"/>	
MORRISON			<input type="checkbox"/>	<input type="checkbox"/>	
NAVAJO			<input type="checkbox"/>	<input type="checkbox"/>	
SHINARUMP			<input type="checkbox"/>	<input type="checkbox"/>	M
WEBER			<input type="checkbox"/>	<input type="checkbox"/>	

Comment: \_\_\_\_\_

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

Signed: \_\_\_\_\_ Print Name: DIANE PETERSON

Title: REGULATORY SPECIALIST Date: 5/17/2010 Email: DLPE@CHEVRON.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: 11/11/2010

### Attachment Check List

Att Doc Num	Name	Doc Description
2554492	FORM 5 SUBMITTED	LF@2495276 2554492
2554494	CEMENT JOB SUMMARY	LF@2495278 2554494

Total Attach: 2 Files