

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

DRILLING COMPLETION REPORT

Document Number:
400107899

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
2. Name of Operator: EXXON MOBIL CORPORATION
3. Address: P O BOX 4358
City: HOUSTON State: TX Zip: 77210-43
4. Contact Name: Beatrice Sabala
Phone: (281) 654-2685
Fax: (281) 654-1940

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: Distance: 2407 feet Direction: FNL Distance: 1399 feet Direction: FEL
As Drilled Latitude: 39.921334 As Drilled Longitude: -108.282520

GPS Data:

Data of Measurement: 09/07/2010 PDOP Reading: 1.8 GPS Instrument Operator's Name: D Petty

** If directional footage

at Top of Prod. Zone Distance: 2588 feet Direction: FSL Distance: 1186 feet Direction: FEL
Sec: 33 Twp: 1S Rng: 97W
at Bottom Hole Distance: 2413 feet Direction: FSL Distance: 1132 feet Direction: FEL
Sec: 33 Twp: 1S Rng: 97W

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&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 0 TVD 0

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:

Gasview, Radial Analysis Bond Log, Reservoir Performance Monitor, Mug Logs, Directional Survey

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Top	Cement Bot	Status
CONDUCTOR	26	16	75.00	120	96	0	120	CALC
SURF	14+3/4	10+3/4	45.50	4,386	1,150	1,345	4,400	CALC
1ST	8+3/4	4+1/2	15.10	12,355	2,489	4,586	12,371	CALC

ADDITIONAL CEMENT

Cement work date: _____

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
DV TOOL	SURF	1,345	1,150	0	1,345

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	
			<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: Beatrice Sabala

Title: Technical Assistant Date: _____ Email: beatrice.sabala@exxonmobil.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: _____

Attachment Check List

Att Doc Num	Name
400107999	

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)