

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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DRILLING COMPLETION REPORT

Document Number:

400113101

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 05-067-09482-00 6. County: LA PLATA
7. Well Name: FEDERAL LAND BANK GAS UN Well Number: 4
8. Location: QtrQtr: NWSW Section: 24 Township: 33N Range: 9W Meridian: N
Footage at surface: Distance: 1963 feet Direction: FSL Distance: 1057 feet Direction: FWL
As Drilled Latitude: 37.087148 As Drilled Longitude: -107.782982

GPS Data:

Data of Measurement: 07/01/2008 PDOP Reading: 2.2 GPS Instrument Operator's Name: Brent Carter

** If directional footage

at Top of Prod. Zone Distance: 861 feet Direction: FSL Distance: 1750 feet Direction: FWL
Sec: 24 Twp: 33N Rng: 9W
at Bottom Hole Distance: 808 feet Direction: FSL Distance: 1782 feet Direction: FWL
Sec: 24 Twp: 33N Rng: 9W

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

11. Federal, Indian or State Lease Number: Fee in CA

12. Spud Date: (when the 1st bit hit the dirt) 05/16/2008 13. Date TD: 05/21/2008 14. Date Casing Set or D&A: 05/23/2008

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 3590 TVD 3498 17 Plug Back Total Depth MD 3879 TVD _____

18. Elevations GR 6759 KB 6775

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/CCL/GR/RST

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								
SURF	8+5/8	12+1/4	15.8	439	324	0	450	
1ST	5+1/2	7+7/8	28	3,880	485	0	3,887	

ADDITIONAL CEMENT

Cement work date: _____

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

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	3,270	3,606	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

This well is in CA-COC-56256

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: _____

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)