

**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:

1688036

**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: 10079 4. Contact Name: HANNAH KNOPPING  
2. Name of Operator: ANTERO RESOURCES PICEANCE CORPORATION Phone: (303) 357-6412  
3. Address: 1625 17TH ST STE 300 Fax: (303) 357-7315  
City: DENVER State: CO Zip: 80202

5. API Number 05-045-18166-00 6. County: GARFIELD  
7. Well Name: VALLEY FARMS Well Number: I5  
8. Location: QtrQtr: NESW Section: 13 Township: 6S Range: 92W Meridian: 6  
Footage at surface: Distance: 2455 feet Direction: FSL Distance: 1811 feet Direction: FWL  
As Drilled Latitude: 39.526635 As Drilled Longitude: -107.618636

## GPS Data:

Data of Measurement: 03/03/2010 PDOP Reading: 1.9 GPS Instrument Operator's Name: FRANK W. HARRINGT

## \*\* If directional footage

at Top of Prod. Zone Distance: 1453 feet Direction: FSL Distance: 2507 feet Direction: FWL  
Sec: 13 Twp: 6S Rng: 92W  
at Bottom Hole Distance: 1449 feet Direction: FSL Distance: 2511 feet Direction: FWL  
Sec: 13 Twp: 6S Rng: 92W

9. Field Name: MAMM CREEK 10. Field Number: 52500  
11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 02/10/2010 13. Date TD: 02/20/2010 14. Date Casing Set or D&A: 02/22/2010

## 15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 7520 TVD 7270 17 Plug Back Total Depth MD 7468 TVD 721818. Elevations GR 5650 KB 5674

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 AND TRIPLE COMBO

## 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	24	16		84	80	0	84	CALC
SURF	12+1/4	9+5/8		1,037	275	0	1,047	CALC
1ST	7+7/8	4+1/2		7,511	800	3,590	7,511	CBL

### 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	
MESAVERDE	3,632		<input type="checkbox"/>	<input type="checkbox"/>	/WMFK
CAMEO	6,275		<input type="checkbox"/>	<input type="checkbox"/>	TOP GAS 5497
ROLLINS	7,262		<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: Y \_\_\_\_\_

Print Name: HANNAH KNOPPING

Title: PERMIT REPRESENTATIVE

Date: 3/24/2010

Email: HKNOPPING@ANTERORESOURCES.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: 12/29/2010

### Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

### General Comments

User Group	Comment	Comment Date
Permit	REQUEST CEMENT TICKETS ON SURFACE PIPE (3rd TIME.) DHS CEMENT TICKETS SUPPLIED. DHS	10/28/2010 1:20:00 PM

Total: 1 comment(s)