

FORM
5Rev
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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Document Number:

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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.

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 05-067-09684-00 6. County: LA PLATA
7. Well Name: MCCARVILLE GU C Well Number: 3
8. Location: QtrQtr: SWNW Section: 23 Township: 33N Range: 9W Meridian: N
Footage at surface: Distance: 1887 feet Direction: FNL Distance: 979 feet Direction: FWL
As Drilled Latitude: 37.091476 As Drilled Longitude: -107.801375

GPS Data:

Data of Measurement: 10/02/2009 PDOP Reading: 2.0 GPS Instrument Operator's Name: Bob Cress

** If directional footage

at Top of Prod. Zone Distance: 810 feet Direction: FNL Distance: 1824 feet Direction: FWL
Sec: 23 Twp: 33n Rng: 9w
at Bottom Hole Distance: 748 feet Direction: FNL Distance: 1853 feet Direction: FWL
Sec: 23 Twp: 33N Rng: 9w

9. Field Name: IGNACIO BLANCO 10. Field Number: 3830011. Federal, Indian or State Lease Number: Fee12. Spud Date: (when the 1st bit hit the dirt) 08/01/2009 13. Date TD: 08/07/2009 14. Date Casing Set or D&A: 08/07/2009

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 3826 TVD 3366 17 Plug Back Total Depth MD 3779 TVD 18. Elevations GR 6652 KB 6668

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 - logs submitted with Preliminary form 5 - 11/19/2009.

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Lin Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8	24	0	387	300		403	
1ST	7+7/8	5+1/2	15.5	0	3,776	3,776		3,826	

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	3,101	3,541	<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: 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

User Group	Comment	Comment Date

Total: 0 comment(s)