

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:

2071630

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: KRIS 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 05-067-09691-00 6. County: LA PLATA
7. Well Name: PATRICK, GARY GU Well Number: 4
8. Location: QtrQtr: SWNW Section: 29 Township: 34N Range: 7W Meridian: M
Footage at surface: Distance: 2492 feet Direction: FNL Distance: 937 feet Direction: FEL
As Drilled Latitude: 37.162500 As Drilled Longitude: -107.637972

GPS Data:

Data of Measurement: 12/21/2009 PDOP Reading: 3.2 GPS Instrument Operator's Name: BOB CRESS

** If directional footage

at Top of Prod. Zone Distance: 1722 feet Direction: FSL Distance: 725 feet Direction: FWL
Sec: 29 Twp: 34N Rng: 7W
at Bottom Hole Distance: 1608 feet Direction: FSL Distance: 678 feet Direction: FWL
Sec: 29 Twp: 34N Rng: 7W

9. Field Name: IGNACIO BLANCO 10. Field Number: 38300
11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 12/04/2009 13. Date TD: 12/06/2009 14. Date Casing Set or D&A: 12/07/2009

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 3483 TVD 3184 17 Plug Back Total Depth MD 3471 TVD 3172

18. Elevations GR 6731 KB 6746 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/RST

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8		0	475	350	0	475	
1ST	7+7/8	5+1/2		0	3,472	350	0	3,473	

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	3,062	3,278	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

DIRECTIONAL SURVEY, CEMENT TICKETS AND LOGS WERE SUBMITTED WITH PRELIMINARY FORM 5 DATED 12/29/2009.

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

Signed: _____ Print Name: KRISTINA A. LEE

Title: REGULATORY Date: 10/5/2010 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: David S. Nashin Director of COGCC Date: 2/9/2011

Attachment Check List

Att Doc Num	Name
2071630	FORM 5 SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)