

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:

2555868

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: 16700 4. Contact Name: DIANE PETERSON  
2. Name of Operator: CHEVRON USA INC Phone: (970) 675-3842  
3. Address: 6001 BOLLINGER CANYON RD Fax: (970) 675-3800  
City: SAN RAMON State: CA Zip: 94583

5. API Number 05-103-06219-00 6. County: RIO BLANCO  
7. Well Name: U P Well Number: 19-28  
8. Location: QtrQtr: SWNW Section: 28 Township: 2N Range: 102W Meridian: 6  
Footage at surface: Distance: 1954 feet Direction: FNL Distance: 636 feet Direction: FWL  
As Drilled Latitude: 40.115880 As Drilled Longitude: -108.855427

GPS Data:

Data of Measurement: 03/16/2006 PDOP Reading: 5.5 GPS Instrument Operator's Name: J FLOYD

\*\* If directional footage

at Top of Prod. Zone Distance: \_\_\_\_\_ feet Direction: \_\_\_\_\_ Distance: \_\_\_\_\_ feet Direction: \_\_\_\_\_  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_  
at Bottom Hole Distance: \_\_\_\_\_ feet Direction: \_\_\_\_\_ Distance: \_\_\_\_\_ feet Direction: \_\_\_\_\_  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_

9. Field Name: RANGELY 10. Field Number: 72370  
11. Federal, Indian or State Lease Number: 47443

12. Spud Date: (when the 1st bit hit the dirt) 08/20/1946 13. Date TD: 11/01/1946 14. Date Casing Set or D&A: 11/11/1946

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 6390 TVD \_\_\_\_\_ 17 Plug Back Total Depth MD 6382 TVD \_\_\_\_\_

18. Elevations GR 5274 KB 5280 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 FROM 5660' TO SURFACE

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
CONDUCTOR	19	16		0	56	75	0	56	
SURF	13+3/4	10+3/4		0	1,004	425		1,004	
1ST		7		0	5,593	1,000	2,745		CBL
1ST LINER	7	5+1/2		5482	6,383	5,482	5,482	6,383	CALC

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	
DAKOTA	3,143		<input type="checkbox"/>	<input type="checkbox"/>	
MORRISON	3,260		<input type="checkbox"/>	<input type="checkbox"/>	
CURTIS	3,830		<input type="checkbox"/>	<input type="checkbox"/>	
ENTRADA	4,010		<input type="checkbox"/>	<input type="checkbox"/>	
CARMEL	4,172		<input type="checkbox"/>	<input type="checkbox"/>	
NAVAJO	4,248		<input type="checkbox"/>	<input type="checkbox"/>	
CHINLE	4,816		<input type="checkbox"/>	<input type="checkbox"/>	
WEBER	5,697		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Converted production to an injection well. run MIT chart on 6/10/2010

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

Signed: \_\_\_\_\_ Print Name: DIANE L PETERSON

Title: REGULATORY SPECIALIST Date: 6/15/2010 Email: DLPE@CHEVRON.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. Neshin* Director of COGCC Date: 2/16/2011

**Attachment Check List**

Att Doc Num	Name
2555868	FORM 5 SUBMITTED

Total Attach: 1 Files

**General Comments**

User Group	Comment	Comment Date
Permit	Converted to IJ well, req digital CBL log	11/9/2010 10:51:09 AM

Total: 1 comment(s)