

**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:

400157651

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: 10332

4. Contact Name: Danielle Gavito

2. Name of Operator: PATARA OIL & GAS LLC

Phone: (303) 820-4480

3. Address: 333 CLAY STREET, STE #3960

Fax: (303) 820-4124

City: HOUSTON State: TX Zip: 77002

5. API Number 05-113-06251-00

6. County: SAN MIGUEL

7. Well Name: ANDY'S MESA FEDERAL

Well Number: 76

8. Location: QtrQtr: NESE Section: 20 Township: 44N Range: 16W Meridian: N

Footage at surface: Distance: 1467 feet Direction: FSL Distance: 528 feet Direction: FEL

As Drilled Latitude: As Drilled Longitude:

GPS Data:

Data of Measurement: PDOP Reading: GPS Instrument Operator's Name:

** If directional footage

at Top of Prod. Zone Distance: 1859 feet Direction: FSL Distance: 843 feet Direction: FEL

Sec: 20 Twp: 44N Rng: 16W

at Bottom Hole Distance: 1859 feet Direction: FSL Distance: 843 feet Direction: FEL

Sec: 20 Twp: 44N Rng: 16W

9. Field Name: ANDY'S MESA

10. Field Number: 2500

11. Federal, Indian or State Lease Number: COC45989

12. Spud Date: (when the 1st bit hit the dirt) 08/02/2010 13. Date TD: 08/19/2010 14. Date Casing Set or D&A: 08/22/2010

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 7118 TVD 7070 17 Plug Back Total Depth MD 6570 TVD 6522

18. Elevations GR 7030 KB 7047

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:

Triple Combo

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	20	1216	42	0	40	50	0	40	VISU
SURF	12+1/4	9+5/8	36	0	2,569	900	0	2,569	VISU
1ST	8+3/4	5+1/2	17	2075	7,070	930	2,075	7,070	

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	
MORRISON	425		<input type="checkbox"/>	<input type="checkbox"/>	
ENTRADA	1,163		<input type="checkbox"/>	<input type="checkbox"/>	
NAVAJO	1,400		<input type="checkbox"/>	<input type="checkbox"/>	
WINGATE	2,122		<input type="checkbox"/>	<input type="checkbox"/>	
CHINLE	2,433		<input type="checkbox"/>	<input type="checkbox"/>	
CUTLER	3,599		<input type="checkbox"/>	<input type="checkbox"/>	
HONAKER TRAIL	6,870		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

The as-drilled GPS data will be submitted at a future date on a sundry notice.

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

Signed: _____ Print Name: Kimberly Rodell

Title: Permit Agent Date: _____ Email: kim@banko1.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
400160849	LAS-ELECTRONIC
400160851	PDF-INDUCTION
400160852	PDF-SONIC
400160853	PDF-MICROLOG
400160856	CEMENT JOB SUMMARY
400160857	CEMENT JOB SUMMARY
400160859	DIRECTIONAL SURVEY
400160860	WELLBORE DIAGRAM

Total Attach: 8 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)