

|   |  |  |   |    |    |    |    |
|---|--|--|---|----|----|----|----|
| <b>FORM</b><br><b>5</b><br>Rev<br>02/08   | <b>State of Colorado</b><br><b>Oil and Gas Conservation Commission</b><br>1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109 |                           | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table><br>Document Number:<br><br><b>400168487</b> | DE | ET | OE | ES |
| DE  | ET   | OE   | ES  |    |    |    |    |
| <b>DRILLING COMPLETION REPORT</b>   |  |  |   |    |    |    |    |
| 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 <input checked="" type="checkbox"/> Final completion <input type="checkbox"/> Preliminary completion  |  |  |   |    |    |    |    |
| 1. OGCC Operator Number: <u>69175</u>   |  | 4. Contact Name: <u>Jeff Glossa</u>  |   |    |    |    |    |
| 2. Name of Operator: <u>PETROLEUM DEVELOPMENT CORPORATION</u>   |  | Phone: <u>(303) 831-3972</u>   |   |    |    |    |    |
| 3. Address: <u>1775 SHERMAN STREET - STE 3000</u>   |  | Fax: <u>(303) 860-5838</u>   |   |    |    |    |    |
| City: <u>DENVER</u>   | State: <u>CO</u>   | Zip: <u>80203</u>  |   |    |    |    |    |
| 5. API Number <u>05-123-31957-00</u>  |  | 6. County: <u>WELD</u>   |   |    |    |    |    |
| 7. Well Name: <u>LAJCO</u>  |  | Well Number: <u>17RD</u>   |   |    |    |    |    |
| 8. Location:    QtrQtr: <u>SENE</u> Section: <u>17</u> Township: <u>4N</u> Range: <u>67W</u> Meridian: <u>6</u>   |  |  |   |    |    |    |    |
| Footage at surface:    Distance: <u>1373</u> feet    Direction: <u>FNL</u>  |  | Distance: <u>1129</u> feet    Direction: <u>FEL</u>  |   |    |    |    |    |
| As Drilled Latitude: <u>40.316420</u>   |  | As Drilled Longitude: <u>-104.909970</u>   |   |    |    |    |    |
| GPS Data:   |  |  |   |    |    |    |    |
| Data of Measurement: <u>04/14/2011</u>  |  | PDOP Reading: <u>1.5</u> GPS Instrument Operator's Name: <u>Holly L.Tracy</u>                                |   |    |    |    |    |
| ** If directional footage at Top of Prod. Zone  |  | Dist.: <u>77</u> feet. Direction: <u>FNL</u> Dist.: <u>1298</u> feet. Direction: <u>FEL</u>                  |   |    |    |    |    |
| Sec: <u>17</u> Twp: <u>4N</u> Rng: <u>67W</u>   |  |  |   |    |    |    |    |
| ** If directional footage at Bottom Hole  |  | Dist.: <u>77</u> feet. Direction: <u>FNL</u> Dist.: <u>1297</u> feet. Direction: <u>FEL</u>                  |   |    |    |    |    |
| Sec: <u>17</u> Twp: <u>4N</u> Rng: <u>67W</u>   |  |  |   |    |    |    |    |
| 9. Field Name: <u>WATTENBERG</u>  |  | 10. Field Number: <u>90750</u>   |   |    |    |    |    |
| 11. Federal, Indian or State Lease Number:    _____   |  |  |   |    |    |    |    |
| 12. Spud Date: (when the 1st bit hit the dirt) <u>02/15/2011</u> 13. Date TD: <u>02/19/2011</u> 14. Date Casing Set or D&A: <u>02/20/2011</u>   |  |  |   |    |    |    |    |
| 15. Well Classification:  |  |  |   |    |    |    |    |
| <input type="checkbox"/> Dry <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas/Coalbed <input type="checkbox"/> Disposal <input type="checkbox"/> Stratigraphic <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Storage <input type="checkbox"/> Observation   |  |  |   |    |    |    |    |
| 16. Total Depth    MD <u>7530</u> TVD** <u>7321</u>   |  | 17 Plug Back Total Depth    MD <u>7482</u> TVD** <u>7308</u>   |   |    |    |    |    |
| 18. Elevations    GR <u>4790</u> KB <u>4804</u>   |  | 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:   |  |  |   |    |    |    |    |
| <u>CBL, CNL/CDL/DIL</u>   |  |  |   |    |    |    |    |
| 20. Casing, Liner and Cement:   |  |  |   |    |    |    |    |

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

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          | 24    | 0             | 692           | 490       | 0       | 692     | CALC   |
| 1ST         | 7+7/8        | 4+1/2          | 11.6  | 0             | 7,517         | 1,030     | 0       | 7,517   | 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                    |   |
| SUSSEX         | 4,139          |        | <input type="checkbox"/> | <input type="checkbox"/> |   |
| SHANNON        | 4,709          |        | <input type="checkbox"/> | <input type="checkbox"/> |   |
| NIOBRARA       | 7,042          |        | <input type="checkbox"/> | <input type="checkbox"/> |   |
| FORT HAYS      | 7,346          |        | <input type="checkbox"/> | <input type="checkbox"/> |   |
| CODELL         | 7,367          |        | <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: Jeff Glossa

Title: Sr Engineering Tech Date: 5/24/2011 Email: jglossa@petd.com

**Attachment Check List**

| Att Doc Num                 | Document Name         | attached ?                              |  |
|-----------------------------|-----------------------|---|--|
| <u>Attachment Checklist</u> |                       |   |  |
| 400168509                   | CMT Summary *         | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
|                             | Core Analysis         | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| 400168511                   | Directional Survey ** | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
|                             | DST Analysis          | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
|                             | Logs                  | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
|                             | Other                 | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| <u>Other Attachments</u>    |                       |   |  |
| 400168487                   | FORM 5 SUBMITTED      | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |

**General Comments**

| User Group | Comment                             | Comment Date        |
|------------|-------------------------------------|---------------------|
| Permit     | e-mailed Jeff Glossa requesting 5A. | 7/1/2011 7:28:00 AM |

Total: 1 comment(s)

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**