

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



DE ET OE ES

Document Number:

400179389

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: 100264

2. Name of Operator: XTO ENERGY INC

3. Address: 382 CR 3100

City: AZTEC State: NM Zip: 87410

4. Contact Name: Wanett McCauley

Phone: (505) 333-3630

Fax: (505) 333-3284

5. API Number 05-071-09854-00

6. County: LAS ANIMAS

7. Well Name: GOLDEN EAGLE

Well Number: 30-02

8. Location: QtrQtr: NWNE Section: 30 Township: 33S Range: 67W Meridian: 6

Footage at surface: Distance: 423 feet Direction: FNL Distance: 1895 feet Direction: FEL

As Drilled Latitude: 37.149208 As Drilled Longitude: -104.924981

GPS Data:

Data of Measurement: 07/11/2011 PDOP Reading: 5.9 GPS Instrument Operator's Name: Gary L. Terry

** 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: PURGATOIRE RIVER

10. Field Number: 70830

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 06/13/2011 13. Date TD: 07/14/2011 14. Date Casing Set or D&A: 06/15/2011

15. Well Classification:

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

16. Total Depth MD 1923 TVD 17 Plug Back Total Depth MD 1862 TVD

18. Elevations GR 7277 KB 7281

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:

Open Hole, CBL

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 | 17+1/2 | 13+3/8 | 54.5 | 0 | 46 | 65 | 0 | 46 | VISU |
| SURF | 11 | 8+5/8 | 24 | 0 | 634 | 260 | 0 | 634 | VISU |
| 1ST | 7+7/8 | 5+1/2 | 15.5 | 0 | 1,909 | 260 | 0 | 1,909 | 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 | |
| RATON COAL | 0 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| VERMEJO COAL | 1,304 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| TRINIDAD | 1,710 | | <input type="checkbox"/> | <input type="checkbox"/> | |

Comment:

Hard copies of logs will be mailed as soon as received from vendors.

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

Signed: _____ Print Name: Wanett McCauley

Title: Reg Compliance Technician Date: _____ Email: wanett_mccauley@xtoenergy.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 |
|-------------|---------------------------|
| 400179391 | CEMENT JOB SUMMARY |
| 400179392 | CEMENT JOB SUMMARY |
| 400182771 | LAS-COMBINATION OPEN HOLE |
| 400182782 | PDF-CEMENT BOND |
| 400184778 | CEMENT JOB SUMMARY |

Total Attach: 5 Files

General Comments

User Group Comment Comment Date

| | | |
|--|--|--|
| | | |
|--|--|--|

Total: 0 comment(s)