

FORM
5Rev
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

Document Number:

400170070

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: 76104

4. Contact Name: Jane Strutt

2. Name of Operator: SAMSON RESOURCES COMPANY

Phone: (918) 591-1140

3. Address: TWO WEST SECOND ST

Fax:

City: TULSA State: OK Zip: 74103

5. API Number 05-067-09835-00

6. County: LA PLATA

7. Well Name: IGNACIO 33-7

Well Number: 16-4

8. Location: QtrQtr: SWSE Section: 33 Township: 33N Range: 7W Meridian: N

Footage at surface: Distance: 1052 feet Direction: FSL Distance: 2125 feet Direction: FEL

As Drilled Latitude: 37.056172 As Drilled Longitude: -107.612446

GPS Data:

Date of Measurement: 05/28/2011 PDOP Reading: 3.4 GPS Instrument Operator's Name: D Myers

** If directional footage at Top of Prod. Zone Dist.: 1288 feet. Direction: FSL Dist.: 1036 feet. Direction: FEL

Sec: 33 Twp: 33N Rng: 7W

** If directional footage at Bottom Hole Dist.: 1338 feet. Direction: FSL Dist.: 810 feet. Direction: FEL

Sec: 33 Twp: 33N 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) 04/03/2011 13. Date TD: 04/07/2011 14. Date Casing Set or D&A: 04/08/2011

15. Well Classification:

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

16. Total Depth MD 3275 TVD** 2932 17 Plug Back Total Depth MD 3170 TVD** 2837

18. Elevations GR 6287 KB 6298

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/GR/CCL/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

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	
KIRTLAND	2,214	2,741	<input type="checkbox"/>	<input type="checkbox"/>	
FRUITLAND COAL	2,741	3,125	<input type="checkbox"/>	<input type="checkbox"/>	
PICTURED CLIFFS	3,125		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: _____ Print Name: Jane E Strutt

Title: Regulatory Technician Date: 6/3/2011 Email: jstrutt@samson.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	REQ DIGITAL LOGS	7/21/2011 12:12:56 PM

Total: 1 comment(s)