

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:

2112502

## 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

4. Contact Name: WANETT MCCAULEY

2. Name of Operator: XTO ENERGY INC

Phone: (505) 333-3630

3. Address: 382 CR 3100

Fax: (505) 333-3284

City: AZTEC State: NM Zip: 87410

5. API Number 05-071-09757-00

6. County: LAS ANIMAS

7. Well Name: GOLDEN EAGLE

Well Number: 17-15H

8. Location: QtrQtr: SWSE Section: 17 Township: 33S Range: 67W Meridian: 6

Footage at surface: Distance: 684 feet Direction: FSL Distance: 1734 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 Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

\*\* If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: 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) 02/11/2010 13. Date TD: 14. Date Casing Set or D&amp;A:

## 15. Well Classification:

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

16. Total Depth MD 905 TVD\*\* 17 Plug Back Total Depth MD TVD\*\*

18. Elevations GR 7764 KB 7767

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:

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:

<b>FORMATION LOG INTERVALS AND TEST ZONES</b>					
FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
			<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

PLAN TO MOVE ON WITH A RIG CAPBLE OF DRILLING TO TD WHEN ECONOMIC CONDITIONS ARE FAVORABLE.

SURFACE CASING ONLY

WELL STATUS IS DRILLING

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: REGULATION COMP TECH

Date: 3/17/2010

Email: WANETT\_MCCAULEY@XTOENERGY.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>

Total: 0 comment(s)