

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
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Document Number:

400184665

## 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: 69175 4. Contact Name: Jeff Glossa  
 2. Name of Operator: PETROLEUM DEVELOPMENT CORPORATION Phone: (303) 831-3972  
 3. Address: 1775 SHERMAN STREET - STE 3000 Fax: (303) 860-5838  
 City: DENVER State: CO Zip: 80203

5. API Number 05-123-32520-00 6. County: WELD  
 7. Well Name: Knievel Well Number: 23-12D  
 8. Location: QtrQtr: NESW Section: 12 Township: 6N Range: 67W Meridian: 6  
 Footage at surface: Distance: 1700 feet Direction: FSL Distance: 2447 feet Direction: FWL  
 As Drilled Latitude: 40.499030 As Drilled Longitude: -104.842470

## GPS Data:

Data of Measurement: 06/21/2011 PDOP Reading: 1.7 GPS Instrument Operator's Name: Holly L.Tracy

## \*\* If directional footage

at Top of Prod. Zone Distance: 2010 feet Direction: FSL Distance: 2073 feet Direction: FWL  
 Sec: 12 Twp: 6N Rng: 67W  
 at Bottom Hole Distance: 2012 feet Direction: FSL Distance: 2071 feet Direction: FWL  
 Sec: 12 Twp: 6N Rng: 67W

9. Field Name: SEVERANCE 10. Field Number: 77030

11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 05/30/2011 13. Date TD: 06/02/2011 14. Date Casing Set or D&A: 06/03/2011

## 15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation
16. Total Depth MD 7465 TVD 7421 17 Plug Back Total Depth MD 7428 TVD 738418. Elevations GR 4866 KB 4880

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, CNL/CDL/DIL

## 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
SURF	12+1/4	8+5/8	24	0	691	490	0	691	VISU
1ST	7+7/8	4+1/2	11.6	0	7,454	1,045	0	7,454	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	4,352		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,760		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,992		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,281		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,302		<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: \_\_\_\_\_ Email: jglossa@petd.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
400184671	CEMENT JOB SUMMARY
400184672	DIRECTIONAL SURVEY

Total Attach: 2 Files

### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)