

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



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Document Number:

400167725

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: 3250 4. Contact Name: Jodi Keeler
 2. Name of Operator: ANTELOPE ENERGY COMPANY LLC Phone: (308) 235-4661
 3. Address: P O BOX 577 Fax: (308) 235-4550
 City: KIMBALL State: NE Zip: 69145

5. API Number 05-123-32486-00 6. County: WELD
 7. Well Name: State Well Number: 7-62-36
 8. Location: QtrQtr: NWNW Section: 36 Township: 7N Range: 62W Meridian: 6
 Footage at surface: Distance: 660 feet Direction: FNL Distance: 660 feet Direction: FWL
 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: WILDCAT 10. Field Number: 9999911. Federal, Indian or State Lease Number: 8430.512. Spud Date: (when the 1st bit hit the dirt) 12/13/2010 13. Date TD: 12/18/2010 14. Date Casing Set or D&A: 12/20/2010

15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation
16. Total Depth MD 6737 TVD** _____ 17 Plug Back Total Depth MD 6708 TVD** _____18. Elevations GR 4780 KB 4792

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:

Dual Induction, Compensated Density, Compensated Neutron, Sonic, Cement Bond Log

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	9+5/8	36	0	512	300	0	514	CALC
1ST	8+3/4	7+0/0	23	0	6,734	175	5,082	6,735	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	
PARKMAN	3,395		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,322		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	6,552		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	6,598		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

No completion attempt has been made in this wellbore.

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

Signed: _____ Print Name: Jodi Keeler

Title: Production Manager Date: 5/23/2011 Email: jodik@antelope-energy.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2072502	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Directional Survey **	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400167897	Other	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
<u>Other Attachments</u>					
400167725	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400167785	PDF-COMBINATION OPEN HOLE	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400167790	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	REC CMT TKTS	7/25/2011 8:04:43 AM
Permit	req cmt tkts, as drilled gps	7/20/2011 8:47:04 AM

Total: 2 comment(s)