

FORM
5
Rev
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:
400198072

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: 16700
2. Name of Operator: CHEVRON PRODUCTION COMPANY
3. Address: 100 CHEVRON RD
City: RANGELY State: CO Zip: 81648
4. Contact Name: DIANE PETERSON
Phone: (970) 675-3842
Fax: (970) 675-3800

5. API Number 05-103-11855-00
6. County: RIO BLANCO
7. Well Name: EMERALD Well Number: 94X
8. Location: QtrQtr: SESE Section: 26 Township: 2N Range: 103W Meridian: 6
Footage at surface: Distance: 1243 feet Direction: FSL Distance: 1055 feet Direction: FEL
As Drilled Latitude: 40.111232 As Drilled Longitude: -108.917993

GPS Data:
Data of Measurement: 07/14/2011 PDOP Reading: 1.1 GPS Instrument Operator's Name: J FLOYD

** If directional footage
at Top of Prod. Zone Distance: 924 feet Direction: FSL Distance: 1123 feet Direction: FEL
Sec: 26 Twp: 2N Rng: 103W
at Bottom Hole Distance: feet Direction: Distance: feet Direction:
Sec: Twp: Rng:

9. Field Name: RANGELY 10. Field Number: 72370
11. Federal, Indian or State Lease Number: FEE

12. Spud Date: (when the 1st bit hit the dirt) 05/31/2011 13. Date TD: 06/15/2011 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 6795 TVD 17 Plug Back Total Depth MD 6795 TVD

18. Elevations GR 5504 KB 5520
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:
CEMENT BOND LOG, VARIABLE DENSITY LOG AND GAMMA RAY - CCL

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	2,001	820	0	2,001	VISU
1ST	8+3/4	7+0/8	23	0	6,450	900	0	6,450	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	
WEBER	6,450	6,795	<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: DIANE L PETERSON

Title: REGULATORY SPECIALIST Date: _____ Email: DLPE@CHEVRON.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
400198082	CEMENT JOB SUMMARY
400198083	CEMENT JOB SUMMARY
400198085	DIRECTIONAL SURVEY

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)