

**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:

400196488

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: 10340

4. Contact Name: Dean Rogers

2. Name of Operator: SUNDANCE ENERGY INC

Phone: (303) 543-5710

3. Address: 380 INTERLOCKEN CRESCENT - STE #601

Fax: (303) 543-5701

City: BROOMFIELD State: CO Zip: 80021

5. API Number 05-123-33460-00

6. County: WELD

7. Well Name: Schell

Well Number: 41-6

8. Location: QtrQtr: NENE Section: 6 Township: 3N Range: 67W Meridian: 6

Footage at surface: Distance: 180 feet Direction: FNL Distance: 1180 feet Direction: FEL

As Drilled Latitude: 40.262169 As Drilled Longitude: -104.927554

GPS Data:

Data of Measurement: 08/19/2011 PDOP Reading: 1.4 GPS Instrument Operator's Name: Ben Milius

** If directional footage

at Top of Prod. Zone Distance: feet Direction: FNL Distance: feet Direction: FEL

Sec: 6 Twp: 3N Rng: 67W

at Bottom Hole Distance: feet Direction: FNL Distance: feet Direction: FEL

Sec: 6 Twp: 3N Rng: 67W

9. Field Name: WATTENBERG

10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 05/26/2011 13. Date TD: 05/31/2011 14. Date Casing Set or D&A: 06/01/2011

15. Well Classification:

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

16. Total Depth MD TVD 17 Plug Back Total Depth MD TVD

18. Elevations GR 4916 KB 4928

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:

Induction
Compensated Density/Neutron
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	8+5/8	12+1/4	24#	0	664	470	0	664	CALC
1ST	4+1/2	7+7/8	11.6#	0	7,494	200	6,508	7,494	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	
NIOBRARA	7,008	7,270	<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,329	7,348	<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: Dean Rogers

Title: Operations Engineer Date: _____ Email: drogers@sundanceenergy.net

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
400196505	LAS-
400196506	LAS-

Total Attach: 2 Files

General Comments

User Group Comment Comment Date

--	--	--

Total: 0 comment(s)