

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:

400179411

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  
2. Name of Operator: XTO ENERGY INC  
3. Address: 382 CR 3100  
City: AZTEC State: NM Zip: 87410  
4. Contact Name: Wanett McCauley  
Phone: (505) 333-3630  
Fax: (505) 333-3284

5. API Number 05-071-09853-00  
6. County: LAS ANIMAS  
7. Well Name: GOLDEN EAGLE Well Number: 30-08  
8. Location: QtrQtr: SENE Section: 30 Township: 33S Range: 67W Meridian: 6  
Footage at surface: Distance: 2132 feet Direction: FNL Distance: 1060 feet Direction: FEL  
As Drilled Latitude: 37.144700 As Drilled Longitude: -104.922116

GPS Data:  
Date of Measurement: 06/24/2011 PDOP Reading: 5.9 GPS Instrument Operator's Name: Gary L. Terry

\*\* 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) 06/09/2011 13. Date TD: 06/12/2011 14. Date Casing Set or D&A: 06/13/2011

15. Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 2366 TVD\*\* 17 Plug Back Total Depth MD 2318 TVD\*\*

18. Elevations GR 7721 KB 7724  
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

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
CONDUCTOR	17+1/2	13+3/8	54.5	0	46	88	0	46	VISU
SURF	11	8+5/8	24	0	1,059	285	0	1,059	VISU
1ST	7+7/8	5+1/2	15.5	0	2,361	285	600	2,361	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	
RATON COAL	0		<input type="checkbox"/>	<input type="checkbox"/>	
VERMEJO COAL	1,740		<input type="checkbox"/>	<input type="checkbox"/>	
TRINIDAD	2,132		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Hard copies of logs will be mailed as soon as received from vendors.

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: Reg Compliance Technician Date: 7/12/2011 Email: wanett\_mccauley@xtoenergy.com

#### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400179414	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"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>Other Attachments</b>			
400179411	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400182752	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400184116	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

#### General Comments

User Group	Comment	Comment Date
Permit	REC CBL DOC# 1669603, PER W.M.@XTO THERE WERE NOT OH LOGS	7/25/2011 12:40:40 PM
Permit	REQ HARD COPY LOGS	7/18/2011 8:24:57 AM

Total: 2 comment(s)