

**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:

400199943

**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

4. Contact Name: Julie Justus

2. Name of Operator: CHEVRON USA INC

Phone: (970) 257-6042

3. Address: 6001 BOLLINGER CANYON RD

Fax: (970) 245-6489

City: SAN RAMON State: CA Zip: 94583

5. API Number 05-045-17293-00

6. County: GARFIELD

7. Well Name: SKR

Well Number: 698-09-AV-10

8. Location: QtrQtr: SENE Section: 9 Township: 6S Range: 98W Meridian: 6

Footage at surface: Distance: 1345 feet Direction: FNL Distance: 1023 feet Direction: FEL

As Drilled Latitude: 39.551019 As Drilled Longitude: -108.329829

## GPS Data:

Data of Measurement: 12/30/2008 PDOP Reading: 2.6 GPS Instrument Operator's Name: Ivan Martin

\*\* If directional footage at Top of Prod. Zone Dist.: 1473 feet. Direction: FNL Dist.: 1968 feet. Direction: FEL

Sec: 9 Twp: 6S Rng: 98W

\*\* If directional footage at Bottom Hole Dist.: 1525 feet. Direction: FNL Dist.: 1997 feet. Direction: FEL

Sec: 9 Twp: 6S Rng: 98W

9. Field Name: SKINNER RIDGE

10. Field Number: 77548

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 03/17/2009 13. Date TD: 05/03/2009 14. Date Casing Set or D&amp;A: 05/04/2009

## 15. Well Classification:

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

16. Total Depth MD 6285 TVD\*\* 6108 17 Plug Back Total Depth MD 6209 TVD\*\* 6032

18. Elevations GR 5823 KB 5948

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	26	16	65	0	58		0	58	CALC
SURF	12+1/4	8+5/8	24	0	1,000	295	0	1,000	CALC
1ST	7+7/8	4+1/2	11.6	0	6,310	990	960	6,310	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	
WASATCH G	1,991	2,115	<input type="checkbox"/>	<input type="checkbox"/>	
FORT UNION	2,115	3,142	<input type="checkbox"/>	<input type="checkbox"/>	
OHIO CREEK	3,142	3,473	<input type="checkbox"/>	<input type="checkbox"/>	
WILLIAMS FORK	3,473	5,796	<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO COAL	5,796	5,998	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	5,998	6,156	<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: Julie Justus

Title: Regulatory Specialist Date: 8/28/2011 Email: jjustus@chevron.com

#### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2113045	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"/>
<u>Other Attachments</u>					
400199943	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400200465	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	Rec'd cement summaries	9/6/2011 10:37:13 AM
Permit	Reviewed again and notified opr of need for cement tickets.	9/2/2011 9:17:23 AM
Permit	CBL received.	8/31/2011 7:52:28 AM
Permit	Need cement tickets, directional survey and logs. Requested from Opr J. Justus who is out of office until 9/5/11	8/29/2011 10:55:51 AM

Total: 4 comment(s)