

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:
400172207

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: 19170
2. Name of Operator: CONQUEST OIL COMPANY
3. Address: 8207 W 20TH STREET - SUITE B
City: GREELEY State: CO Zip: 80634
4. Contact Name: CLAYTON DOKE
Phone: (907) 669-7411
Fax: (970) 669-4077

5. API Number 05-123-32858-00
6. County: WELD
7. Well Name: SWD Well Number: C8A
8. Location: QtrQtr: NESE Section: 29 Township: 11N Range: 62W Meridian: 6
Footage at surface: Distance: 2551 feet Direction: FSL Distance: 238 feet Direction: FEL
As Drilled Latitude: 40.893930 As Drilled Longitude: -104.335530

GPS Data:

Date of Measurement: 06/07/2011 PDOP Reading: 2.2 GPS Instrument Operator's Name: ADAM KELLY

** 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: WATTENBERG 10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 04/12/2011 13. Date TD: 04/27/2011 14. Date Casing Set or D&A: 04/30/2011

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 10557 TVD** 17 Plug Back Total Depth MD 10551 TVD**

18. Elevations GR 5176 KB 5196

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:

GR, FDC, CNL, DIL, 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
SURF	12+1/4	8+5/8	36	0	1,261	455	0	1,261	VISU
1ST	8+3/4	7	23	0	9,044	1,110	2,024	9,044	CBL
1ST LINER	6+1/8	4+1/2	11.6	8973	10,552				

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	6,980		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,252		<input type="checkbox"/>	<input type="checkbox"/>	
CARLILE	7,274		<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	7,524		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,822		<input type="checkbox"/>	<input type="checkbox"/>	
SKULL CREEK	7,896		<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	8,042		<input type="checkbox"/>	<input type="checkbox"/>	
MORRISON	8,196		<input type="checkbox"/>	<input type="checkbox"/>	
ENTRADA	8,396		<input type="checkbox"/>	<input type="checkbox"/>	
PERMIAN	8,452		<input type="checkbox"/>	<input type="checkbox"/>	
BLAINE	8,990		<input type="checkbox"/>	<input type="checkbox"/>	
LYONS	9,000		<input type="checkbox"/>	<input type="checkbox"/>	
LOWER SATANKA	9,204		<input type="checkbox"/>	<input type="checkbox"/>	
WOLFCAMP	9,328		<input type="checkbox"/>	<input type="checkbox"/>	
AMAZON	9,426		<input type="checkbox"/>	<input type="checkbox"/>	
COUNCIL GROVE	9,505		<input type="checkbox"/>	<input type="checkbox"/>	
Admire	9,602		<input type="checkbox"/>	<input type="checkbox"/>	
VIRGIL	9,742		<input type="checkbox"/>	<input type="checkbox"/>	
MISSOURI	9,990		<input type="checkbox"/>	<input type="checkbox"/>	
DES MOINES	10,200		<input type="checkbox"/>	<input type="checkbox"/>	
ATOKA	10,386		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

All measurements are from KB, excepting that 0' (zero feet) designates surface. The Form 5A remains in DRAFT pending operations.

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

Signed: _____

Print Name: CLAYTON DOKE

Title: ENGINEER

Date: 6/29/2011

Email: cdoke@petersonenergy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400180299	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"/>
Other Attachments			
400172207	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400172216	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400172231	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400180321	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)