

FORM
5Rev
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:

400215926

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: 96340

4. Contact Name: Jack Fincham

2. Name of Operator: WIEPKING-FULLERTON ENERGY LLC

Phone: (303) 906-3335

3. Address: 4600 S DOWNING ST

Fax: (303) 761-9067

City: ENGLEWOOD State: CO Zip: 80113

5. API Number 05-073-06436-00

6. County: LINCOLN

7. Well Name: Kerry

Well Number: # 3

8. Location: QtrQtr: SESW Section: 20 Township: 10S Range: 55W Meridian: 6

Footage at surface: Distance: 660 feet Direction: FSL Distance: 1980 feet Direction: FWL

As Drilled Latitude: 39.158710 As Drilled Longitude: -103.577700

GPS Data:

Date of Measurement: 09/22/2011 PDOP Reading: 3.1 GPS Instrument Operator's Name: Keith Westfall

** 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: GREAT PLAINS

10. Field Number: 32756

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 08/26/2011 13. Date TD: 09/13/2011 14. Date Casing Set or D&A: 09/16/2011

15. Well Classification:

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

16. Total Depth MD 8184 TVD** 17 Plug Back Total Depth MD 8132 TVD**

18. Elevations GR 5202 KB 5215

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:

High Resolution Induction
Compensated Density CCompensated Neutron Gamma Ray
Radial 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	12+1/4	8+5/8	24	0	315	265	0	315	CALC
1ST	7+1/4	5+1/2	17	0	8,132	580	3,600	8,132	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

Details of work:

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	3,126		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	3,646		<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	4,080		<input type="checkbox"/>	<input type="checkbox"/>	
SHAWNEE	5,673		<input type="checkbox"/>	<input type="checkbox"/>	
LANSING	6,614		<input type="checkbox"/>	<input type="checkbox"/>	
MARMATON	6,940		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
PAWNEE	7,006		<input type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	7,088		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	7,615		<input type="checkbox"/>	<input type="checkbox"/>	
KEYES	7,801		<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: Jack Fincham

Title: Agent Date: _____ Email: fincham4@msn.com

The subreport 'subreport3' could not be found at the specified location W:\Inetpub\Net\Reports\AttachListNew.rdlc. Please

General Comments

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

Total: 0 comment(s)