

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:

2588693

## 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: 10084

4. Contact Name: JUDY GLINISTY

2. Name of Operator: PIONEER NATURAL RESOURCES USA INC

Phone: (303) 675-2658

3. Address: 1401 17TH ST STE 1200

Fax: (303) 294-1275

City: DENVER State: CO Zip: 80202

5. API Number 05-071-09814-00

6. County: LAS ANIMAS

7. Well Name: DJEMBE

Well Number: 21-12

8. Location: QtrQtr: NE/NW Section: 12 Township: 33S Range: 68W Meridian: 6

Footage at surface: Distance: 788 feet Direction: FNL Distance: 2203 feet Direction: FWL

As Drilled Latitude: 37.191190 As Drilled Longitude: -104.948130

## GPS Data:

Date of Measurement: 09/13/2011 PDOP Reading: 5.2 GPS Instrument Operator's Name: ADRIAN VALDEZ

\*\* 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) 08/25/2011 13. Date TD: 08/26/2011 14. Date Casing Set or D&amp;A: 08/26/2011

## 15. Well Classification:

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

16. Total Depth MD 2350 TVD\*\* 17 Plug Back Total Depth MD 2308 TVD\*\*

18. Elevations GR 7717 KB 7721

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:

COMPENSATED DENISTY REPORT, SINGEL INDUCTION, MUD AND CEMENT BOND LOGS

## 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   | 12+1/4       | 13+3/8         |       | 0             | 8             |           |         |         | CALC   |
| SURF        | 12+1/4       | 8+5/8          |       | 0             | 437           | 241       | 0       | 437     | CALC   |
| 1ST         | 7+7/8        | 5+1/2          |       | 0             | 2,321         | 273       | 248     | 2,321   | 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                    |   |
| RATON COAL     | 0              | 1,794  | <input type="checkbox"/> | <input type="checkbox"/> |   |
| VERMEJO COAL   | 1,794          | 2,168  | <input type="checkbox"/> | <input type="checkbox"/> |   |
| TRINIDAD       | 2,168          |        | <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: JUDY GLINISTY

Title: SR ENGINEERING TECH

Date: 10/4/2011

Email: JUDY.GLINISTY@PXD.COM

**Attachment Check List**

| Att Doc Num                 | Document Name         | attached ? |                                     |    |                                     |
|-----------------------------|-----------------------|------------|-------------------------------------|----|-------------------------------------|
| <u>Attachment Checklist</u> |                       |            |                                     |    |                                     |
| 2588694                     | 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 type="checkbox"/>            | No | <input checked="" type="checkbox"/> |
|                             | Other                 | Yes        | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> |
| <u>Other Attachments</u>    |                       |            |                                     |    |                                     |
| 2588693                     | FORM 5 SUBMITTED      | Yes        | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |

**General Comments**

| User Group | Comment | Comment Date |
|------------|---------|--------------|
|            |         |              |

Total: 0 comment(s)