

Document Number:  
 400216812

**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: 10275 4. Contact Name: Loni Davis  
 2. Name of Operator: AUGUSTUS ENERGY PARTNERS LLC Phone: (970) 332-3585  
 3. Address: P O BOX 250 Fax: (970) 332-3587  
 City: WRAY State: CO Zip: 80758

5. API Number 05-125-11924-00 6. County: YUMA  
 7. Well Name: Lueking Well Number: 41-19 5N46W  
 8. Location: QtrQtr: NENE Section: 19 Township: 5N Range: 46W Meridian: 6  
 Footage at surface: Distance: 1225 feet Direction: FNL Distance: 746 feet Direction: FEL  
 As Drilled Latitude: \_\_\_\_\_ As Drilled Longitude: \_\_\_\_\_

GPS Data:  
 Date of Measurement: \_\_\_\_\_ PDOP Reading: \_\_\_\_\_ GPS Instrument Operator's Name: \_\_\_\_\_

\*\* 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: ROCK CREEK 10. Field Number: 74006  
 11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 10/10/2011 13. Date TD: 10/13/2011 14. Date Casing Set or D&A: 10/09/2011

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

16. Total Depth MD 2996 TVD\*\* \_\_\_\_\_ 17 Plug Back Total Depth MD 2965 TVD\*\* \_\_\_\_\_

18. Elevations GR 3904 KB 3916 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 Density/Neutron Dual Induction, Dual Induction Guard Log Gamma Ray, Compensated Density/Neutron Gamma Ray, 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	9+7/8	7	23	0	606	135	0	606	CALC
1ST	6+1/4	4+1/2	10.5	1	3,007	200	0	2,965	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:

<b>FORMATION LOG INTERVALS AND TEST ZONES</b>					
FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
BENTONITE	2,703		<input type="checkbox"/>	<input type="checkbox"/>	Log Tops
NIOBRARA	2,761	2,794	<input type="checkbox"/>	<input type="checkbox"/>	Log Tops

Comment:

Hard copy of logs were mailed on 11/08/11. LAS format of logs have been submitted by logging company on 10/20/11 and the CBL on 11/07/11. As Built reading will be submitted as soon as received from Surveyor.

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

Signed: \_\_\_\_\_ Print Name: Loni J. Davis \_\_\_\_\_

Title: Oper Acctg & Reg Spec Date: \_\_\_\_\_ Email: ldavis@augustusenergy.com

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

**General Comments**

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

Total: 0 comment(s)