| 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 | STATE OF COLORADO OIL & GAS | DE | ET | OE | ES |

State of Colorado
Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109

DRILLING COMPLETION REPORT

Document Number:

400254769

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   05-045-18438-00   6. County: GARFIELD
7. Well Name: SKR   Well Number: 698-09-AV-24
8. Location: QtrQtr: SENE   Section: 9   Township: 6S   Range: 98W   Meridian: 6
   Footage at surface: Distance: 1380   feet   Direction: FNL   Distance: 1009   feet   Direction: FEL
   As Drilled Latitude: 39.550923   As Drilled Longitude: -108.329778

GPS Data:
   Data of Measurement: 12/10/2008   PDOP Reading: 3.1   GPS Instrument Operator's Name: Ivan Martin

   ** If directional footage at Top of Prod. Zone   Dist.: 2356 feet. Direction: FNL   Dist.: 661 feet. Direction: FEL
            Sec: 9   Twp: 6S   Rng: 98W
   ** If directional footage at Bottom Hole   Dist.: 2431 feet. Direction: FNL   Dist.: 793 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) 05/09/2009 13. Date TD: 05/26/2009 14. Date Casing Set or D&A: 05/27/2009

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

16. Total Depth   MD   6337   TVD** 6146   17 Plug Back Total Depth   MD   6260   TVD**   6069

18. Elevations   GR   5923   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	36.95	0	48		0	48	CALC
SURF	12+1/4	8+5/8	24	0	975	290	0	975	CBL
1ST	7+7/8	4+1/2	11.6	0	6,312	980	316	6,312	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	
WASATCH G	2,001	2,130	☐	☐	
FORT UNION	2,130	3,201	☐	☐	
OHIO CREEK	3,201	3,534	☐	☐	
WILLIAMS FORK	3,534	5,856	☐	☐	
CAMEO	5,856	6,061	☐	☐	
ROLLINS	6,061	6,214	☐	☐	

Comment:

Paper CBL mailed 2/22/2012

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: _____   Email: _____

Attachment Check List

Att Doc Num	Document Name		attached ?	
Attachment Checklist				
	CMT Summary *	Yes ☐	No	☒
	Core Analysis	Yes ☐	No	☒
	Directional Survey **	Yes ☐	No	☒
	DST Analysis	Yes ☐	No	☒
	Logs	Yes ☒	No	☐
	Other	Yes ☐	No	☒
Other Attachments				
400254770	LAS-CEMENT BOND	Yes ☒	No	☐
400254771	DIRECTIONAL DATA	Yes ☒	No	☐

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)