

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:

400219769

Date Received:

11/07/2011

## 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: 10276

4. Contact Name: Paul Gottlob

2. Name of Operator: PINE RIDGE OIL &amp; GAS LLC

Phone: (303) 226-1316

3. Address: 600 17TH ST STE 800S

Fax: (303) 226-1301

City: DENVER State: CO Zip: 80202

5. API Number 05-043-06213-00

6. County: FREMONT

7. Well Name: BLUE MARLIN

Well Number: 44-19

8. Location: QtrQtr: SESE Section: 19 Township: 19S Range: 69W Meridian: 6

Footage at surface: Distance: 890 feet Direction: FSL Distance: 1174 feet Direction: FEL

As Drilled Latitude: 38.376435 As Drilled Longitude: -105.148338

## GPS Data:

Date of Measurement: 10/24/2011 PDOP Reading: 1.8 GPS Instrument Operator's Name: Chris Pearson

\*\* If directional footage at Top of Prod. Zone Dist.: 581 feet. Direction: FSL Dist.: 1008 feet. Direction: FEL

Sec: 19 Twp: 19S Rng: 69W

\*\* If directional footage at Bottom Hole Dist.: 1763 feet. Direction: FNL Dist.: 292 feet. Direction: FWL

Sec: 29 Twp: 19S Rng: 69W

9. Field Name: FLORENCE-CANON CITY

10. Field Number: 24600

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 09/26/2011 13. Date TD: 10/27/2011 14. Date Casing Set or D&amp;A: 10/27/2011

## 15. Well Classification:

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

16. Total Depth MD 6085 TVD\*\* 3500 17 Plug Back Total Depth MD 4113 TVD\*\* 3518

18. Elevations GR 5427 KB 5438

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:

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	16+0/0	24+0/0	1/4	0	61	38	0	61	CALC
SURF	9+5/8	12+1/4	32.3	0	806	330	0	806	CALC
1ST	7+0/0	8+3/4	23	0	4,113	45	4,079	4,113	CALC
1ST LINER	4+1/2	6+1/4	11.6	4010	6,085	0	0	0	CALC

**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	
PIERRE	0	6,085	<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: Paul Gottlob

Title: Sr. Engineering Tech. Date: 11/7/2011 Email: paul.gottlob@cometridgeresources.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400220004	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400220002	Directional Survey **	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400220003	Other	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
<u>Other Attachments</u>					
400219769	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400220901	CALIPER	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400220902	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

**General Comments**

User Group	Comment	Comment Date
Permit	Per P. Gottlob no logs were run on this well - approval to delete the attachment and correct the drilling tab. 1/17/2012	1/17/2012 3:54:47 PM
Permit	Email to opr to verify whether logs were run on this well or not. 1/17/2012 NKP	1/17/2012 3:49:58 PM

Total: 2 comment(s)