

FORM
5Rev
02/08

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

2287789

Date Received:

03/02/2012

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: 74165

4. Contact Name: EDWARD INGVE

2. Name of Operator: RENEGADE OIL & GAS COMPANY LLC

Phone: (303) 680-4725

3. Address: P O BOX 460413

Fax: (303) 680-4907

City: AURORA State: CO Zip: 80046-

5. API Number 05-005-07156-00

6. County: ARAPAHOE

7. Well Name: STATE

Well Number: 4

8. Location: QtrQtr: SESW Section: 36 Township: 4S Range: 58W Meridian: 6

Footage at surface: Distance: 756 feet Direction: FSL Distance: 1983 feet Direction: FWL

As Drilled Latitude: 39.655660 As Drilled Longitude: -103.828310

GPS Data:

Date of Measurement: 04/17/2012 PDOP Reading: 2.6 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: ROUGHNECK

10. Field Number: 74870

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 10/14/2011 13. Date TD: 10/18/2011 14. Date Casing Set or D&A: 10/20/2011

15. Well Classification:

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

16. Total Depth MD 5600 TVD** 17 Plug Back Total Depth MD 5600 TVD**

18. Elevations GR 5020 KB 5032

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, COMP. DENSITY/COMP. NEUTRON, MICROLOG

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	11	8+5/8		0	321	136	0	321	CALC
1ST	7+7/8	5+1/2		0	5,586	200	4,230	5,586	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____					
Method used	String	Cementing tool setting/perf 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	
SUSSEX	2,845		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	4,521		<input type="checkbox"/>	<input type="checkbox"/>	
BENTONITE	5,314		<input type="checkbox"/>	<input type="checkbox"/>	X BENTONITE
D SAND	5,407		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	5,449		<input type="checkbox"/>	<input type="checkbox"/>	J-1 SAND
J-2 SAND	5,475		<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: EDWARD INGVE

Title: MANAGER/OWNER Date: 12/6/2011 Email: JBCROG@AOL.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2532803	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>					
2287789	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	Uploaded GPS to form; Uploaded LAS; Attached cement ticket.	7/16/2012 3:35:03 PM
Permit	On hold - missig cement ticket, LAS logs and as-drilled GPS	6/12/2012 10:58:59 AM

Total: 2 comment(s)