

FORM  
5

Rev  
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:

400322589

Date Received:

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: 96340  
2. Name of Operator: WIEPKING-FULLERTON ENERGY LLC  
3. Address: 4600 S DOWNING ST  
City: ENGLEWOOD State: CO Zip: 80113  
4. Contact Name: Jack Fincham  
Phone: (303) 906-3335  
Fax: (303) 761-9067

5. API Number 05-073-06473-00  
6. County: LINCOLN  
7. Well Name: Napali Well Number: # 9  
8. Location: QtrQtr: SWNE Section: 17 Township: 10S Range: 55W Meridian: 6  
Footage at surface: Distance: 1879 feet Direction: FNL Distance: 1820 feet Direction: FEL  
As Drilled Latitude: 39.180800 As Drilled Longitude: -103.572290

GPS Data:

Date of Measurement: 07/12/2012 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: GREAT PLAINS 10. Field Number: 32756

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 05/21/2012 13. Date TD: 05/30/2012 14. Date Casing Set or D&A: 06/01/2012

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 7900 TVD\*\* 17 Plug Back Total Depth MD 7825 TVD\*\*

18. Elevations GR 5177 KB 5190

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 Compensated Neutron Gamma Ray  
High Resolution Induction  
Radial 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
CONDUCTOR	17+1/2	13+3/8	48	0	60	100	0	60	VISU
SURF	12+1/4	8+5/8	24	0	298	165	0	165	VISU
1ST	7+7/8	5+1/2	17	0	7,896	270	6,120	7,896	CBL

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	4,530	175	2,950	4,530

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	
NIOBRARA	3,070		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	3,616		<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	4,058		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	4,093		<input type="checkbox"/>	<input type="checkbox"/>	
SHAWNEE	6,381		<input type="checkbox"/>	<input type="checkbox"/>	
LANSING	6,592		<input type="checkbox"/>	<input type="checkbox"/>	
TORCH	6,950		<input type="checkbox"/>	<input type="checkbox"/>	
PAWNEE A	6,994		<input type="checkbox"/>	<input type="checkbox"/>	
PAWNEE B	7,010		<input type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	7,066		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	7,570		<input type="checkbox"/>	<input type="checkbox"/>	
KEYES	7,744		<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: Jack Fincham

Title: Agent Date: \_\_\_\_\_ Email: fincham4@msn.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400322686	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 checked="" type="checkbox"/>	No <input type="checkbox"/>
400322688	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<u>Other Attachments</u>			
400322680	LAS-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400323753	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

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

Total: 0 comment(s)