

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:

2288763

Date Received:

06/27/2012

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: 10154
2. Name of Operator: ORR ENERGY LLC
3. Address: 1813 61ST AVE STE 200
City: GREELEY State: CO Zip: 80634
4. Contact Name: ED ORR
Phone: (970) 351-8777
Fax: (970) 351-7851

5. API Number 05-123-34088-00
6. County: WELD
7. Well Name: Swift Well Number: 24-65
8. Location: QtrQtr: NWNE Section: 24 Township: 6N Range: 66W Meridian: 6
Footage at surface: Distance: 932 feet Direction: FNL Distance: 1715 feet Direction: FEL
As Drilled Latitude: 40.478524 As Drilled Longitude: -104.721912

GPS Data:
Date of Measurement: 05/18/2012 PDOP Reading: 1.9 GPS Instrument Operator's Name: OWEN MCKEE

** 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: WATTENBERG 10. Field Number: 90750
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 05/08/2012 13. Date TD: 05/12/2012 14. Date Casing Set or D&A: 05/13/2012

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

16. Total Depth MD 7735 TVD** 17 Plug Back Total Depth MD 7668 TVD**

18. Elevations GR 4748 KB 4760
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, DENSITY, NEUTRON, GAMMA, 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
SURF	12+1/4	8+5/8		0	644	460	0	644	CALC
1ST	7+7/8	4+1/2		0	7,702	675	2,165	7,668	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	
PARKMAN	3,660		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,268		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,802		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,096		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,118		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,573		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FORMATION LOG INTERVALS AND TEST ZONES COMMENTS:
FORMATION NAME: J SILTSTONE MEASURED DEPTH TOP: 7554.

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

Signed: _____ Print Name: ED ORR
Title: MANAGER Date: 6/26/2012 Email: RCGRIMMETTE@GMAIL.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
2288764	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>			
2288763	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	Logs received.	10/22/2012 11:44:20 AM
Permit	Siltstone probably a typo. Requested paper induction density neutron and cement bond logs.	10/15/2012 11:26:06 AM
Data Entry	CHECK FORMATIONS - J SILTSTONE.	7/18/2012 1:44:41 PM

Total: 3 comment(s)