FORM 5	State of Colorado		DE	ET	OE	ES
Rev 02/08	**Oil and Gas Conservation Commission**					

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

Document Number: 1825256

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.

Date Received: 07/29/2008

Completion Type ☒ Final completion ☐ Preliminary completion

1. OGCC Operator Number: 10223

4. Contact Name: MARY O'MARA

2. Name of Operator: PLAINS EXPLORATION AND PRODUCTION

Phone: (713) 579-6000

3. Address: 700 MILAM STE 3100

Fax: (713) 579-6202

City: HOUSTON State: TX Zip: 77002

5. API Number 05-077-09151-00

6. County: MESA

7. Well Name: UTE WATER Well Number: 22-10

8. Location: QtrQtr: SESW Section: 22 Township: 9S Range: 94W Meridian: 6

Footage at surface: Distance: 980 feet Direction: FSL Distance: 2179 feet Direction: FWL

As Drilled Latitude: As Drilled Longitude:

GPS Data:

Data of Measurement: PDOP Reading: GPS Instrument Operator's Name:

** If directional footage at Top of Prod. Zone Dist.: 1921 feet. Direction: FSL Dist.: 2010 feet. Direction: FEL

Sec: 22 Twp: 9S Rng: 94W

** If directional footage at Bottom Hole Dist.: 1903 feet. Direction: FSL Dist.: 2039 feet. Direction: FEL

Sec: 22 Twp: 9S Rng: 94W

9. Field Name: BRUSH CREEK 10. Field Number: 7562

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 05/10/2007 13. Date TD: 05/21/2007 14. Date Casing Set or D&A: 05/24/2007

15. Well Classification:

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

16. Total Depth MD 7700 TVD** 7685 17 Plug Back Total Depth MD 7690 TVD** 7675

18. Elevations GR 6995 KB 7013

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		0	40	0	0	40	CALC
SURF	12+1/4	8+5/8		0	1,415	410	0	1,415	CALC
1ST	7+7/8	4+1/2		0	7,685	1,535	660	7,685	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	
WILLIAMS FORK	5,490	6,442	☐	☐	
CAMEO	6,442	6,835	☐	☐	
ROLLINS	6,835	7,254	☐	☐	
COZZETTE	7,254	7,432	☐	☐	
CORCORAN	7,432		☐	☐	

Comment:

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

Signed: _____   Print Name: Mary O'Hara _____

Title: _____   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 ☒

General Comments

User Group	**Comment**	**Comment Date**

Total: 0 comment(s)