

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



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Document Number:

2286134

Date Received:

11/21/2011

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: 10254

4. Contact Name: RICH LARSON

2. Name of Operator: RED MESA HOLDINGS/O&G LLC

Phone: (970) 588-3302

3. Address: 5619 DTC PARKWAY - STE 800

Fax: (970) 588-3562

City: GREENWOOD State: CO Zip: 80111

5. API Number 05-067-09864-00

6. County: LA PLATA

7. Well Name: GREER

Well Number: 34-3

8. Location: QtrQtr: NWSW Section: 34 Township: 33N Range: 12W Meridian: N

Footage at surface: Distance: 1970 feet Direction: FSL Distance: 621 feet Direction: FWL

As Drilled Latitude: 37.059380 As Drilled Longitude: -108.144330

GPS Data:

Date of Measurement: 07/18/2012 PDOP Reading: 2.2 GPS Instrument Operator's Name: Scott Wiebe

** 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: RED MESA

10. Field Number: 72890

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 08/13/2011 13. Date TD: 08/31/2011 14. Date Casing Set or D&A: 09/01/2011

15. Well Classification:

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

16. Total Depth MD 3671 TVD** 17 Plug Back Total Depth MD 3665 TVD**

18. Elevations GR 6818 KB 6530

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:

MUD LOG, CBL, ARRAY INDUCTION/COMPENSATED NEUTRON/DENSITY/GR/SP, FORMATION MICRO IMAGER/ELEMENTAL

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	12+3/4	9+5/8		0	370	42	0	370	CALC
SURF	8+1/2	7		0	1,670	153	0	1,670	CALC
1ST	6+1/4	4+1/2		0	1,458	202	1,659	3,665	CALC

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	
LEWIS	10	432	<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	432	683	<input type="checkbox"/>	<input type="checkbox"/>	
CLIFF HOUSE	683	799	<input type="checkbox"/>	<input type="checkbox"/>	
MENEFEE	799	1,148	<input type="checkbox"/>	<input type="checkbox"/>	
POINT LOOKOUT	1,148	1,474	<input type="checkbox"/>	<input type="checkbox"/>	
MANCOS	1,474	2,533	<input type="checkbox"/>	<input type="checkbox"/>	
GALLUP	2,533	3,277	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
GREENHORN	3,277	3,342	<input type="checkbox"/>	<input type="checkbox"/>	
GRANEROS	3,342	3,421	<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	3,421	3,607	<input type="checkbox"/>	<input type="checkbox"/>	
BURRO CANYON	3,607	3,635	<input type="checkbox"/>	<input type="checkbox"/>	
MORRISON	3,635	3,755	<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: RICH LARSONTitle: AUTHORIZED PERSON Date: 11/16/2011 Email: RLARSON@REDMESA1.COM**Attachment Check List**

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2518043	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>					
2286134	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
2286135	CORRESPONDENCE	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Operator says there in no CBL log. Received the cement ticket.	10/31/2012 12:12:32 PM
Permit	The well is not completed yet. Operator will run a CBL prior to completion in 2013.	10/29/2012 2:55:48 PM
Permit	Need a cement ticket for surface casing.	10/26/2012 2:42:23 PM
Permit	CBL log appears to be a cement volume log.	10/26/2012 2:30:37 PM

Total: 4 comment(s)