

**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:

400377669

Date Received:

02/22/2013

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: 10322

4. Contact Name: Tina Larreau

2. Name of Operator: EAST CHEYENNE GAS STORAGE LLC

Phone: (720) 351-4006

3. Address: 10901 WEST TOLLER DRIVE - SUITE 200

Fax: (720) 351-4006

City: LITTLETON State: CO Zip: 80127

5. API Number 05-075-08197-00

6. County: LOGAN

7. Well Name: STATE

Well Number: 1-36 L

8. Location: QtrQtr: SENE Section: 36 Township: 12N Range: 53W Meridian: 6

Footage at surface: Distance: 1980 feet Direction: FNL Distance: 660 feet Direction: FEL

As Drilled Latitude: 40.973020 As Drilled Longitude: -103.231330

GPS Data:

Date of Measurement: 12/17/2012 PDOP Reading: 2.6 GPS Instrument Operator's Name: Duane Russell

** 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: PEETZ WEST

10. Field Number: 68300

11. Federal, Indian or State Lease Number: GS-3414

12. Spud Date: (when the 1st bit hit the dirt) 12/29/1969 13. Date TD: 01/05/1970 14. Date Casing Set or D&A: 01/21/1970

15. Well Classification:

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

16. Total Depth MD 5352 TVD** 17 Plug Back Total Depth MD 5330 TVD**

18. Elevations GR 4543 KB 4549

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

East Cheyenne Gas Storage LLC acquired this well in 2010 and no logs were available to us.

All other logs are available from MJ Systems, East Cheyenne Gas Storage LLC is only a licensed user of log data distributed by MJ Systems and can not distribute the log data. COGCC can obtain a copy of the electric logs from MJ Systems. Electric log is only open hole available.

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+0/0	8+5/8	24	0	126	125	0	126	CALC
1ST	8+5/8	5+1/2	15.36	0	5,330	500	2,450	5,330	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 02/15/2010

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	
D SAND	5,154		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	5,282		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

CBL run date of 07-21-10 has the wrong TWN - log says 32N - should say 12N - logging co typo

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

Signed: _____ Print Name: Tina Larreau

Title: Permitting Agent Date: 2/22/2013 Email: tlarreau@mehllc.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400377874	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"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400377669	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400377774	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400377883	LAS-DENSITY/NEUTRON	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)