

**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:

400424226

Date Received:

07/09/2013

**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: 78110

4. Contact Name: Anne Baldrige

2. Name of Operator: SWEPI LP

Phone: (303) 305-7555

3. Address: 4582 S ULSTER ST PKWY #1400

Fax:

City: DENVER State: CO Zip: 80237

5. API Number 05-081-07768-00

6. County: MOFFAT

7. Well Name: Deal Gulch

Well Number: 4-16

8. Location: QtrQtr: SWNE Section: 16 Township: 5N Range: 90W Meridian: 6

Footage at surface: Distance: 2073 feet Direction: FNL Distance: 2505 feet Direction: FEL

As Drilled Latitude: 40.388231 As Drilled Longitude: -107.498450

## GPS Data:

Data of Measurement: 02/28/2013 PDOP Reading: 1.7 GPS Instrument Operator's Name: J.G. Gonzales

\*\* If directional footage at Top of Prod. Zone Dist.: 2367 feet. Direction: FNL Dist.: 2782 feet. Direction: FEL

Sec: 16 Twp: 5N Rng: 90W

\*\* If directional footage at Bottom Hole Dist.: 877 feet. Direction: FNL Dist.: 723 feet. Direction: FEL

Sec: 16 Twp: 5N Rng: 90W

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number: 8471.5

12. Spud Date: (when the 1st bit hit the dirt) 03/28/2013 13. Date TD: 04/12/2013 14. Date Casing Set or D&amp;A: 04/16/2013

## 15. Well Classification:

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

16. Total Depth MD 7451 TVD\*\* 5495 17 Plug Back Total Depth MD 7451 TVD\*\* 5495

18. Elevations GR 7207 KB 7235

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:

Int: Spectra Gamma Ray/PEX/ECS, Isolation Scanner, note: logging tool stuck at 2443 ft, not run the rest of INT.  
Prod: Pipe Conveyed CMI (Compact Micro Imager)  
Hard Copy logs submitted as PDF attachments to this Form 5.

## 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	30	20		0	90	48	0	90	CALC
SURF	13+1/2	10+3/4	40.5	0	1,600	730	0	1,600	CALC
1ST	9+7/8	7+5/8	33.7	0	4,374	373	2,400	4,374	CBL
1ST LINER	6+3/4	5+1/2	17	4164	7,451				

### 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	
MESAVERDE	0	1,170	<input type="checkbox"/>	<input type="checkbox"/>	
MANCOS	1,170	4,470	<input type="checkbox"/>	<input type="checkbox"/>	
MORAPOS	2,124	2,321	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	4,470		<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: Anne Baldrige

Title: Swan Regulatory Lead Date: 7/9/2013 Email: A.baldrige@shell.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2157165	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400424267	Directional Survey **	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400427877	Other	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
<u>Other Attachments</u>					
400424226	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400424270	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400424271	GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400424273	GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400424275	MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400424277	MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400424283	MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400445065	PLATFORM EXPRESS	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400445073	PLATFORM EXPRESS	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Surf. cmt. summ. attached.	7/18/2013 10:09:34 AM
Permit	Isolation scanner attached as PDF in doc #400427889, Req'd surf. cement summary.	7/11/2013 4:09:51 PM

Total: 2 comment(s)