

**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



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Document Number:

400464568

Date Received:

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: 66190

4. Contact Name: Joe Don Glassey

2. Name of Operator: OMIMEX PETROLEUM INC

Phone: (817) 460-7777

3. Address: 7950 JOHN T WHITE ROAD

Fax: (817) 460-1381

City: FORT WORTH State: TX Zip: 76120

5. API Number 05-125-11969-00

6. County: YUMA

7. Well Name: Bledsoe

Well Number: 13x-2-5-45

8. Location: QtrQtr: SWSW Section: 2 Township: 5N Range: 45W Meridian: 6

Footage at surface: Distance: 306 feet Direction: FSL Distance: 630 feet Direction: FWL

As Drilled Latitude: 40.425820 As Drilled Longitude: -102.356390

GPS Data:

Data of Measurement: 11/04/2010 PDOP Reading: 2.0 GPS Instrument Operator's Name: E. Johnson

** 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: BALLYNEAL

10. Field Number: 1970

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 06/24/2013 13. Date TD: 06/27/2013 14. Date Casing Set or D&A: 06/27/2013

15. Well Classification:

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

16. Total Depth MD 2736 TVD** 17 Plug Back Total Depth MD TVD**

18. Elevations GR 3811 KB 3817

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:

triple combo, array induction, neutron density, directional survey, caliper cement volume,

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	9+7/8	7	17	0	478	230	0	478	VISU

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	
NIOBRARA	2,556	2,588	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

The resistivity read low for the niobrara formation and in result to that it would not be economically feasible to perf and frac the well. So we decided to plug and abandon.

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

Signed: _____ Print Name: Joe Don Glassey

Title: Petroleum Eng. Tech

Date:

Email: joe_glassey@omimexgroup.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
	CMT Summary *	Yes	<input type="checkbox"/>	No	<input checked="" 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>					
400466298	PDF-	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400466299	PDF-	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400466300	PDF-	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400466301	PDF-	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400466307	PDF-	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400466316	DRILLING COMPLETION REPORT	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400467516	OPERATIONS SUMMARY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)