

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



DE ET OE ES

Document Number:

400479146

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: 19160

4. Contact Name: Dave Banko

2. Name of Operator: CONOCO PHILLIPS COMPANY

Phone: (303) 820-4480

3. Address: P O BOX 2197

Fax: (303) 820-4124

City: HOUSTON State: TX Zip: 77252-

5. API Number 05-005-07199-00

6. County: ARAPAHOE

7. Well Name: Tebo 1

Well Number: 1H

8. Location: QtrQtr: Lot 1 Section: 1 Township: 5S Range: 64W Meridian: 6

Footage at surface: Distance: 660 feet Direction: FNL Distance: 250 feet Direction: FEL

As Drilled Latitude: 39.649250 As Drilled Longitude: -104.491469

GPS Data:

Date of Measurement: 04/30/2013 PDOP Reading: 1.8 GPS Instrument Operator's Name: Dallas Nielsen

** 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: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number: N/A

12. Spud Date: (when the 1st bit hit the dirt) 01/29/2013 13. Date TD: 02/03/2013 14. Date Casing Set or D&A: 02/06/2013

15. Well Classification:

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

16. Total Depth MD 7968 TVD** 17 Plug Back Total Depth MD 6894 TVD**

18. Elevations GR 5933 KB 5957

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:

RT Scanner/Sonic/Density/Neutron/GR/HNGS from TD to 6,000'; GR/Sonic to Surface. (Logs uploaded directly by ConocoPhillips)

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	CMP	0	100	200	0	100	VISU
SURF	12+1/4	9+5/8	36	0	2,137	630	0	2,137	VISU
OPEN HOLE	8+3/4			2137	7,956				

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	OPEN HOLE	6,993	310	6,894	7,941

Details of work:

Set & cemented surface casing to 2137, drilled 8 3/4" pilot hole to 7,968', logged. Ran whipstock and 2 7/8" tailpipe, 6,993' to 7941', total tool length, - 948'. Cemented balanced plug with 310 sxs plugcem, 15.8 ppg, 1.52 cu ft/sk yield. Top of cement at 6,894'.

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	
SHARON SPRINGS	7,396	7,460	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,460	7,783	<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,783	7,810	<input type="checkbox"/>	<input type="checkbox"/>	
CARLILE	7,810	7,870	<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	7,870	7,968	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Logs and attachments uploaded directly from ConocoPhillips. For direct contact, Reba Tidwell, 281-647-1856, email: rebecca.draehn@cop.com.

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

Signed: _____

Print Name: David F. Banko _____

Title: Permit Agent

Date:

Email: dave@banko1.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400489171	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400490892	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"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
400481390	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400486128	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400486129	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400486133	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400486134	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400486136	PDF-CALIPER	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400486137	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400486138	PDF-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400490883	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400490884	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400490887	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400490888	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400490890	PDF-SONIC	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)