

**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:

400481359

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 05-005-07205-00

6. County: ARAPAHOE

7. Well Name: Tebo 33

Well Number: 1H

8. Location: QtrQtr: SWSW Section: 33 Township: 4s Range: 64W Meridian: 6

Footage at surface: Distance: 900 feet Direction: FSL Distance: 310 feet Direction: FWL

As Drilled Latitude: 39.654658 As Drilled Longitude: -104.564811

## GPS Data:

Date of Measurement: 09/16/2013 PDOP Reading: 2.8 GPS Instrument Operator's Name: Dave Swanson

\*\* 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:

12. Spud Date: (when the 1st bit hit the dirt) 06/10/2013 13. Date TD: 06/15/2013 14. Date Casing Set or D&amp;A: 06/18/2013

## 15. Well Classification:

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

16. Total Depth MD 8140 TVD\*\* 17 Plug Back Total Depth MD 6809 TVD\*\*

18. Elevations GR 5840 KB 5864

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/GR from TD (8,140') to surface (Uploaded 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	24	16	CMP	0	100	200	0	100	VISU
SURF	13+1/2	9+5/8	36	0	2,188	850	0	2,188	VISU
OPEN HOLE	8+3/4			2188	8,140				

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: 06/18/2013

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	OPEN HOLE	7,099	360	6,809	8,104

Details of work:

Drilled and set 9 5/8" surface casing to 2,188'. Drilled 8 3/4" pilot bore to TD of 8,140', then logged. Set whipstock and 2 7/8" tailpipe, top of whipstock at 7,099' bottom of tailpipe at 8,104'. Total tool length is 1,005'. Cemented balanced plug with 360 sxs Class G, 15.8 ppg, yield 1.52 cu ft/sk. Top of cement tagged at 6,809'.

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	
HYGIENE	5,233		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,620		<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sidewall cores at 7,806', 7,808', 7,810', 7,812', 7,814', 7,816', 7,818', 7,820', 7,822', 7,828'
FORT HAYS	7,927		<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	8,005		<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>					
400491203	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400491201	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>					
400488861	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400489688	PDF-SONIC	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400489691	PDF-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400489693	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400489694	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400489980	LAS-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400489983	PDF-NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400491173	PDF-CALIPER	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

## General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)