

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:

400507910

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: Justin Carlile

2. Name of Operator: CONOCO PHILLIPS COMPANY

Phone: (281) 647-1857

3. Address: P O BOX 2197

Fax: (281) 647-1935

City: HOUSTON State: TX Zip: 77252-

5. API Number 05-005-07211-00

6. County: ARAPAHOE

7. Well Name: Youngberg 10-11

Well Number: 1H

8. Location: QtrQtr: NESE Section: 11 Township: 4S Range: 64W Meridian: 6

Footage at surface: Distance: 1320 feet Direction: FSL Distance: 255 feet Direction: FEL

As Drilled Latitude: 39.713042 As Drilled Longitude: -104.509494

GPS Data:

Data of Measurement: 11/07/2013 PDOP Reading: 1.4 GPS Instrument Operator's Name: Darren Shanks

** If directional footage at Top of Prod. Zone Dist.: 1402 feet. Direction: FSL Dist.: 952 feet. Direction: FEL

Sec: 11 Twp: 4S Rng: 64W

** If directional footage at Bottom Hole Dist.: 2384 feet. Direction: FSL Dist.: 990 feet. Direction: FWL

Sec: 10 Twp: 4S Rng: 64W

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number: 99999

12. Spud Date: (when the 1st bit hit the dirt) 09/09/2013 13. Date TD: 10/03/2013 14. Date Casing Set or D&A: 10/08/2013

15. Well Classification:

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

16. Total Depth MD 16539 TVD** 7529 17 Plug Back Total Depth MD 16539 TVD** 7529

18. Elevations GR 5673 KB 5697

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:

E-wireline logs were not run, Log While Drilling report attached.
The pdf versions of the LWD and mudlogs will be submitted at a later time.

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+0/0	16+0/0	39.7	0	100	50	0	100	VISU
SURF	13+1/2	9+5/8	36	0	1,959	620	0	1,959	VISU
1ST	8+3/4	7+0/0	32	0	7,805	585	729	7,805	CALC
1ST LINER	6+0/0	4+1/2	13.5	6693	16,529				

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	
SHARON SPRINGS	7,225	7,273	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,273		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

LAS Versions of the Logging While Drilling and the Mudlog are attached. The pdf versions will be submitted separately when received.

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

Signed: _____ Print Name: Justin Carlile

Title: Regulatory Specialist Date: _____ Email: justin.carlile@conocophillips.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400508217	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400508221	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>					
400508222	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400508224	LAS-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400508225	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400511527	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)