

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:

400539718

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: 96340

4. Contact Name: Jack Fincham

2. Name of Operator: WIEPKING-FULLERTON ENERGY LLC

Phone: (303) 906-3335

3. Address: 4600 S DOWNING ST

Fax: (303) 761-9067

City: ENGLEWOOD State: CO Zip: 80113

5. API Number 05-073-06551-00

6. County: LINCOLN

7. Well Name: Easy Go

Well Number: # 6

8. Location: QtrQtr: SENW Section: 15 Township: 6S Range: 54W Meridian: 6

Footage at surface: Distance: 2019 feet Direction: FNL Distance: 1958 feet Direction: FWL

As Drilled Latitude: 39.530130 As Drilled Longitude: -103.427900

GPS Data:

Date of Measurement: 12/18/2013 PDOP Reading: 1.9 GPS Instrument Operator's Name: Elijah Frane

** 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) 11/06/2013 13. Date TD: 11/28/2013 14. Date Casing Set or D&A: 11/28/2013

15. Well Classification:

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

16. Total Depth MD 8259 TVD** 17 Plug Back Total Depth MD 4564 TVD**

18. Elevations GR 5234 KB 5190

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:

High Resolution Induction
Compensated Density Compensated Neutron Gamma Ray

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
1ST	12+1/4	7+7/8	24	0	300	165	0	300	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	
CODELL	4,216		<input type="checkbox"/>	<input type="checkbox"/>	
CEDAR HILLS	5,772		<input type="checkbox"/>	<input type="checkbox"/>	
LANSING	6,898		<input type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	7,432		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	7,868		<input type="checkbox"/>	<input type="checkbox"/>	
OSAGE	8,152	8,182	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Comment:

Easy Go # 6 well is a dry hole. Well was D&A on 11-28-2013. Surface casing in hole. Operator requesting confidential status for all information on Form 5.

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

Signed: _____ Print Name: Jack Fincham

Title: Agent

Date:

Email: fincham4@msn.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400539842	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input 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"/>
400539831	Other	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
<u>Other Attachments</u>					
400539759	PDF-INDUCTION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400539762	PDF-DENSITY/NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400539828	LAS-IND-DENS-NEU	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400539844	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)