

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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| DE | ET | OE | ES |
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Document Number:
400584520

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: 100178 4. Contact Name: Chris Lopez
 2. Name of Operator: SIMMONS, INC.* D. J. Phone: (505) 326-3753
 3. Address: 1009 RIDGEWAY PL STE 200 Fax: (505) 327-4659
 City: FARMINGTON State: NM Zip: 87401

5. API Number 05-033-06174-00 6. County: DOLORES
 7. Well Name: Pinto Well Number: 1-7
 8. Location: QtrQtr: Lot 11 Section: 7 Township: 39N Range: 19W Meridian: N
 Footage at surface: Distance: 2832 feet Direction: FSL Distance: 2840 feet Direction: FEL
 As Drilled Latitude: _____ As Drilled Longitude: _____

GPS Data:
 Date of Measurement: _____ PDOP Reading: _____ GPS Instrument Operator's Name: _____

** 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: PAPOOSE CANYON 10. Field Number: 67300
 11. Federal, Indian or State Lease Number: COC 38420

12. Spud Date: (when the 1st bit hit the dirt) 10/27/2013 13. Date TD: 11/23/2013 14. Date Casing Set or D&A: 11/26/2013

15. Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 6343 TVD** _____ 17 Plug Back Total Depth MD _____ TVD** _____

18. Elevations GR 6609 KB 6621 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:
Cement Bond Log; Caliper; Gamma Ray; Compensated Neutron; Compensated Density; Induction

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 | 17+1/2 | 13+3/8 | 48 | 0 | 59 | 127 | 0 | 59 | |
| SURF | 12+1/4 | 8+5/8 | 36 | 0 | 2,110 | 720 | 0 | 2,110 | |
| 1ST | 7+7/8 | 5+1/2 | 17 | 0 | 6,341 | 991 | 0 | 6,341 | |

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

| Method used | String | Cementing tool setting/perf depth | Cement volume | Cement top | Cement bottom |
|-------------|--------|-----------------------------------|---------------|------------|---------------|
| STAGE TOOL | 1ST | 4,001 | 991 | 0 | 6,341 |

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 | |
| HONAKER TRAIL | 4,530 | 5,932 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| PARADOX | 5,932 | 5,952 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| ISMAY | 5,952 | 6,008 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Upper Ismay |
| HOVENWEEP SHALE | 6,008 | 6,087 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| LOWER ISMAY | 6,087 | 6,143 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| GOTHIC SHALE | 6,143 | 6,199 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| DESERT CREEK | 6,199 | 6,288 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | |
| SHALE | 6,288 | 6,302 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Shale refers to Chimney Rock Shale (6288-6302). |
| AKAH SALT | 6,302 | 6,343 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Comment:

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

Signed: _____

Print Name: Chris S. Lopez

Title: Regulatory Specialist

Date: _____

Email: clopez@djsimmons.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|-----------------------|---|--|
| Attachment Checklist | | | |
| 400584548 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400584541 | Core Analysis | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400584545 | Directional Survey ** | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400584546 | DST Analysis | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Logs | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Other | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Other Attachments | | | |
| 400584531 | PDF-GAMMA RAY | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400584533 | PDF-CALIPER | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400584537 | JPG-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400584538 | LAS- | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400584542 | PDF-CEMENT BOND | 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)