

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:

1654195

Date Received:

06/07/2010

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: 76104

4. Contact Name: KATHY STATON

2. Name of Operator: SAMSON RESOURCES COMPANY

Phone: (918) 583-1791

3. Address: TWO WEST SECOND ST

Fax: (918) 591-1796

City: TULSA State: OK Zip: 74103

5. API Number 05-081-07412-01

6. County: MOFFAT

7. Well Name: WEST DANFORTH

Well Number: 5A-4-3-95

8. Location: QtrQtr: SWNW Section: 4 Township: 3N Range: 95W Meridian: 6

Footage at surface: Distance: 2019 feet Direction: FNL Distance: 675 feet Direction: FWL

As Drilled Latitude: 40.259768 As Drilled Longitude: -108.063681

GPS Data:

Date of Measurement: 12/11/2008 PDOP Reading: 2.6 GPS Instrument Operator's Name: MARK BESSIE

** 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: COC58725

12. Spud Date: (when the 1st bit hit the dirt) 08/11/2008 13. Date TD: 08/04/2009 14. Date Casing Set or D&A: 08/04/2009

15. Well Classification:

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

16. Total Depth MD 9600 TVD** 17 Plug Back Total Depth MD 9600 TVD**

18. Elevations GR 7383 KB 7399

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:

XMAC; HDIL; ZDL/CN

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
SURF	13+1/2	9+5/8		0	620	450	0	620	CALC
1ST	8+3/4	7		0	7,072	310	5,326	7,100	CBL
1ST LINER	6+1/4	4+1/2		6842	9,600				

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	5,053	415	0	5,053

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	
ROLLINS	1,619		<input type="checkbox"/>	<input type="checkbox"/>	
ILES	1,787		<input type="checkbox"/>	<input type="checkbox"/>	
MORAPOS	3,565		<input type="checkbox"/>	<input type="checkbox"/>	
MANCOS B	5,004		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,610		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: Y _____

Print Name: RANDAL MAXWELL _____

Title: MGR REG ENGINEERING

Date: 9/24/2009

Email: KSTATON@SAMSON.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
	CMT Summary *	Yes	<input type="checkbox"/>	No	<input checked="" 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 type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
1654195	DRILLING COMPLETION REPORT	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400580866	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	Had this form "unapproved" so that it could be reapproved for -01 wellbore. Created -01 wellbore in database.	8/21/2014 1:19:21 PM

Total: 1 comment(s)