

FORM
5Rev
09/14State of Colorado
Oil and Gas Conservation Commission

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DE ET OE ES

Document Number:

400834406

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

OGCC Operator Number: 82470

Contact Name: Ty Lunn

Name of Operator: STELBAR OIL CORP INC

Phone: (316) 440-7611

Address: 1625 N WATERFRONT PKWY #200

Fax: (316) 264-0592

City: WICHITA State: KS Zip: 67206-

API Number 05-123-05445-00

County: WELD

Well Name: BLACK HOLLOWS UT-UPRR

Well Number: 7

Location: QtrQtr: NENE Section: 1 Township: 7N Range: 67W Meridian: 6

Footage at surface: Distance: 662 feet Direction: FNL Distance: 663 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.: 662 feet. Direction: FNL Dist.: 663 feet. Direction: FEL

Sec: 1 Twp: 7N Rng: 67W

** If directional footage at Bottom Hole Dist.: 662 feet. Direction: FNL Dist.: 663 feet. Direction: FEL

Sec: 1 Twp: 7N Rng: 67W

Field Name: BLACK HOLLOW

Field Number: 6835

Federal, Indian or State Lease Number: 55328

Spud Date: (when the 1st bit hit the dirt) 06/30/1954 Date TD: 08/30/1954 Date Casing Set or D&A: 08/30/1954

Rig Release Date: 08/30/1954 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 9468 TVD** 9468 Plug Back Total Depth MD 9030 TVD** 9030

Elevations GR 5123 KB 5137 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

CASING, LINER AND CEMENT

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	16	65	0	33	100			VISU
SURF	12+1/4	10+3/4	40.5	0	589	350			VISU
1ST	8+3/4	7	23	0	9,045	400	6,600		CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 05/01/2015

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
SQUEEZE	1ST		50	3,285	3,725

Details of work:

During routine maintenance operations, the production tubing parted and 81 joints of tubing and TA were stuck in hole. During course of fishing operations, 35 joints of tubing were recovered, leaving 46 joints of tubing and TA stuck in hole. The current top of the fish is at 3725'. During fishing operations, a casing leak was found at 3690'. The casing was successfully pressure tested to 500 psig above 3690'. A large amount of shale produced from the casing leak has prevented reaching the top of the fish with fishing tools and the setting of a bridge plug below the leak for isolation. A cement plug was set as follows in attempt to shut off the casing leak and prevent the shale from entering the wellbore:

5/1/2015 to 5/6/2015

1. RIH with open ended tubing to 3689'. RU cementers and spot a 50 sack balanced plug (10.2 bbls cement) at 3689'. Pressure up to 500 psig and displace 3.4 bbls cement into casing leak. Bleed off pressure and had no flowback. Cement was neat cement with 2% CaCl₂.
2. POOH with 12 joints tubing and circulate hole.
3. Finish POOH with tubing.
4. RIH with tubing and tag soft cement at 2714'. Clean out with bit to hard cement at 3285'.
5. POOH with bit and tubing. RIH with SN and 98 joints tubing. NU wellhead. RD workover rig.
6. Temporarily suspend fishing operations.

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
LYONS	8,952	9,008	NO	NO	

Comment:

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

Signed: _____ Print Name: Ty Lunn

Title: Petroleum Engineer Date: _____ Email: tlunn@stelbar.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400841526	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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
400841529	OPERATIONS SUMMARY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400841543	WELLBORE DIAGRAM	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)