

FORM  
5Rev  
09/14

## 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:

400928617

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: 10439

Contact Name: Madelon Raney

Name of Operator: CARRIZO NIOBRARA LLC

Phone: (713) 358-6218

Address: 500 DALLAS STREET #2300

Fax:

City: HOUSTON

State: TX

Zip: 77002

API Number 05-123-39159-00

County: WELD

Well Name: Nelson Ranches

Well Number: 3-27-10-59

Location: QtrQtr: SENE Section: 28 Township: 10N Range: 59W Meridian: 6

Footage at surface: Distance: 2240 feet Direction: FNL Distance: 215 feet Direction: FEL

As Drilled Latitude: 40.810000 As Drilled Longitude: -103.975730

## GPS Data:

Date of Measurement: 04/09/2014 PDOP Reading: 1.9 GPS Instrument Operator's Name: Marc Woodard

\*\* If directional footage at Top of Prod. Zone Dist.: 1332 feet. Direction: FNL Dist.: 617 feet. Direction: FEL

Sec: 28 Twp: 10N Rng: 59W

\*\* If directional footage at Bottom Hole Dist.: 1258 feet. Direction: FNL Dist.: 1402 feet. Direction: FEL

Sec: 27 Twp: 10N Rng: 58W

Field Name: DJ HORIZONTAL NIOBRARA

Field Number: 16950

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 04/27/2014 Date TD: 05/07/2014 Date Casing Set or D&amp;A: 05/02/2014

Rig Release Date: 10/27/2014 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 11233 TVD\*\* 6323 Plug Back Total Depth MD 11233 TVD\*\* 6323

Elevations GR 5167 KB 5184

Digital Copies of ALL Logs must be Attached per Rule 308A ☐

## List Electric Logs Run:

MWD Log and CBL

## 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	24	16	36.9	0	60	6	0	60	VISU
SURF	12+1/4	9+5/8	36	0	1,432	546	0	1,432	VISU
1ST	8+3/4	7	23	0	6,649	611	460	6,649	CBL
1ST LINER	6+1/8	4+1/2	11.6	5557	11,211				

## 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:

## 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	
PIERRE	522		NO	NO	ESTIMATED
PARKMAN	3,775	4,013	NO	NO	ESTIMATED
SUSSEX	4,317	4,592	NO	NO	ESTIMATED
SHARON SPRINGS	6,261	6,392	NO	NO	
NIOBRARA	6,392	11,233	NO	NO	

Comment:

OPEN HOLE LOG WAS NOT RAN ON THIS WELL. COGCC LOG SUBMITTAL POLICY NOT RELEASED AT THE TIME OF DRILLING THIS WELL. A COMPENSATED NEUTRON LOG WAS RAN ON THE NELSON RANCHES 2-27-10-59. FORM 10 WAS SUBMITTED UNDER DOCUMENT #400915028.

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

Signed: \_\_\_\_\_

Print Name: Madelon Raney

Title: Regulatory Compl. Analyst

Date: \_\_\_\_\_

Email: madelon.raney@crzo.net

## Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400928671	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400928669	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>					
400928660	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400928661	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400928666	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400928675	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

### General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)