

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:

400930256

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: CAROL PRUITT

Name of Operator: CARRIZO NIOBRARA LLC

Phone: (713) 328-1000

Address: 500 DALLAS STREET #2300

Fax: (713) 328-1060

City: HOUSTON State: TX Zip: 77002

API Number 05-123-36338-00

County: WELD

Well Name: Pergamos

Well Number: 1-4-34-7-60

Location: QtrQtr: SESE Section: 4 Township: 7N Range: 60W Meridian: 6

Footage at surface: Distance: 92 feet Direction: FSL Distance: 1319 feet Direction: FEL

As Drilled Latitude: 40.597210 As Drilled Longitude: -104.093020

GPS Data:

Date of Measurement: 11/13/2013 PDOP Reading: 3.5 GPS Instrument Operator's Name: MARC WOODARD

** If directional footage at Top of Prod. Zone Dist.: 643 feet. Direction: FSL Dist.: 2040 feet. Direction: FEL

Sec: 4 Twp: 7N Rng: 60W

** If directional footage at Bottom Hole Dist.: 632 feet. Direction: FNL Dist.: 2015 feet. Direction: FEL

Sec: 4 Twp: 7N Rng: 60W

Field Name: DJ HORIZONTAL NIOBRARA

Field Number: 16950

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 06/02/2013 Date TD: 06/11/2013 Date Casing Set or D&A: 06/12/2013

Rig Release Date: 06/13/2013 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 10820 TVD** 6334 Plug Back Total Depth MD 10820 TVD** 6334

Elevations GR 4910 KB 4927 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

MWD W/ GAMMA RAY

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	8	0	60	VISU
SURF	12+1/4	9+5/8	36	0	1,404	657	0	1,404	VISU
1ST	8+3/4	7	23	0	6,365	583	208	6,365	CBL
1ST LINER	6+1/8	4+1/2	11.6	5681	10,815	319	5,715	10,815	CALC

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	
SHARON SPRINGS	6,131	6,265	NO	NO	
NIOBRARA	6,265	10,820	NO	NO	

Comment:

NO OTHER FORMATIONS RECORDED. OPEN HOLE LOG NOT RUN. COGCC LOG SUBMITTAL POLICY NOT RELEASED AT THE TIME OF THIS COMPLETION. FORM 10 SUBMITTED, DOC. NO. 400930331

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

Signed: _____

Print Name: CAROL PRUITT

Title: REGULATORY COMPLIANCE

Date: _____

Email: CAROL.PRUITT@CRZO.NET

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400930295	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400930293	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>		
400930282	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400930284	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400930285	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400930291	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)