

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:

400902274

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: 10500

Contact Name: Frank Canepa

Name of Operator: COACHMAN ENERGY OPERATING COMPANY LLC

Phone: (720) 476-3678

Address: 1125 17TH STREET SUITE 410

Fax: (720) 476-3887

City: DENVER State: CO Zip: 80202

API Number 05-103-12275-00

County: RIO BLANCO

Well Name: Shavetail Federal

Well Number: 34-34

Location: QtrQtr: 3 Section: 34 Township: 1N Range: 103W Meridian: 6

Footage at surface: Distance: 650 feet Direction: FSL Distance: 1453 feet Direction: FEL

As Drilled Latitude: 40.007750 As Drilled Longitude: -108.938460

GPS Data:

Date of Measurement: 02/07/2012 PDOP Reading: 3.0 GPS Instrument Operator's Name: Kyle Tesky

** If directional footage at Top of Prod. Zone Dist.: 606 feet. Direction: FSL Dist.: 1213 feet. Direction: FEL

Sec: 34 Twp: 1N Rng: 103W

** If directional footage at Bottom Hole Dist.: 589 feet. Direction: FSL Dist.: 1187 feet. Direction: FEL

Sec: 34 Twp: 1N Rng: 103W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number: COC-65853

Spud Date: (when the 1st bit hit the dirt) 08/19/2015 Date TD: 09/01/2015 Date Casing Set or D&A: 09/04/2015

Rig Release Date: 09/04/2015 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 4620 TVD** 4610 Plug Back Total Depth MD 4561 TVD** 4551

Elevations GR 5818 KB 5833 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

High Definition Induction Log; Compensated Density/Neutron Log; Sonic Log and DipMeter; 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	26	16	43	0	40	20	0	40	CALC
SURF	12+1/4	8+5/8	24	0	526	400	0	526	CALC
1ST	7+7/8	4+1/2	11.6	0	4,602	760	0	4,602	CBL

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	
MANCOS	2,856		NO	NO	
CASTLEGATE	3,102	4,204	NO	NO	
MANCOS B	4,204	4,399	NO	NO	

Comment:

Shavetail Federal 34-34 was drilled as a vertical well. A downhole survey was run and it shows the natural well bore drift, however it is not a deviated or directional well and therefore a directional survey is not available.

Cement was circulated to the surface on production casing cement job.

CBL log run on 09/23/2015 and it shows top of cement on log at 220 feet.

The well is shut-in waiting on a natural gas pipeline connection.

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

Signed: _____

Print Name: Rick Obernolte

Title: Agent

Date: _____

Email: rickobe1@aol.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400902817	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 checked="" type="checkbox"/> No <input type="checkbox"/>
400912486	Other	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<u>Other Attachments</u>		
400902779	PDF-SONIC	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400902780	PDF-SONIC	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400902784	LAS-INDUCTION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400902793	LAS-INDUCTION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400902794	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400902796	PDF-COMBINATION OPEN HOLE	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400902816	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400912478	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400915984	LAS-DIPMETER	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)