

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:

400929006

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: Jeff Annable

Name of Operator: CARRIZO NIOBRARA LLC

Phone: (303) 928-7128

Address: 500 DALLAS STREET #2300

Fax: (303) 218-5678

City: HOUSTON State: TX Zip: 77002

API Number 05-123-38453-00

County: WELD

Well Name: STATE

Well Number: 4-16-9-60

Location: QtrQtr: NWNW Section: 16 Township: 9N Range: 60W Meridian: 6

Footage at surface: Distance: 730 feet Direction: FNL Distance: 733 feet Direction: FWL

As Drilled Latitude: 40.754950 As Drilled Longitude: -104.104630

GPS Data:

Date of Measurement: 03/13/2014 PDOP Reading: 2.1 GPS Instrument Operator's Name: Marc Woodard

** If directional footage at Top of Prod. Zone Dist.: 663 feet. Direction: FNL Dist.: 904 feet. Direction: FWL

Sec: 16 Twp: 9N Rng: 60W

** If directional footage at Bottom Hole Dist.: 651 feet. Direction: FSL Dist.: 949 feet. Direction: FWL

Sec: 16 Twp: 9N Rng: 60W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number: 3756606

Spud Date: (when the 1st bit hit the dirt) 12/05/2013 Date TD: 12/16/2013 Date Casing Set or D&A: 12/12/2013

Rig Release Date: 12/25/2013 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 10794 TVD** 6435 Plug Back Total Depth MD 10794 TVD** 6435

Elevations GR 5012 KB 5029 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

MWD with Gamma Ray, 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	18	16	36.9	0	60	8	0	60	VISU
SURF	12+1/4	9+5/8	36	0	1,431	541	0	1,431	VISU
1ST	8+3/4	7	23	0	6,539	598	0	6,539	VISU
1ST LINER	6+1/8	4+1/2	11.6	5819	10,769				

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	648		NO	NO	
PARKMAN	3,584	3,983	NO	NO	
SUSSEX	4,300	4,604	NO	NO	
SHARON SPRINGS	6,295	6,335	NO	NO	
NIOBRARA	6,335	10,794	NO	NO	

Comment:

Open Hole log was not ran in this well. The COGCC Log Submittal Policy had not yet been released at the time of this completion.

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

Signed: _____ Print Name: Jeff Annable

Title: Regulatory Analyst Date: _____ Email: regulatory@petro-fs.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400929057	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400929055	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>		
400929051	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400929052	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400929053	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400929054	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)