

FORM 5
Rev 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:
400985341

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: 10598 Contact Name: Spence Laird
Name of Operator: SANDRIDGE EXPLORATION & PRODUCTION LLC Phone: (405) 4296518
Address: 123 ROBERT S KERR AVE Fax:
City: OKLAHOMA CITY State: OK Zip: 73102

API Number 05-057-06535-00 County: JACKSON
Well Name: Gregory Well Number: #5-09H
Location: QtrQtr: SWSW Section: 9 Township: 7N Range: 80W Meridian: 6
Footage at surface: Distance: 202 feet Direction: FSL Distance: 71 feet Direction: FWL
As Drilled Latitude: 40.585258 As Drilled Longitude: -106.387760

GPS Data:
Date of Measurement: 09/12/2013 PDOP Reading: 1.3 GPS Instrument Operator's Name: RAS

** If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:
Sec: Twp: Rng:
** If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:
Sec: Twp: Rng:

Field Name: WILDCAT Field Number: 99999
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 01/15/2016 Date TD: 01/20/2016 Date Casing Set or D&A:
Rig Release Date: 01/22/2016 Per Rule 308A.b.

Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD TVD** Plug Back Total Depth MD TVD**

Elevations GR 8118 KB 8137 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
No logs were ran. No casing was set.

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	30	20	52.78	0	104	216	0	104	VISU

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date:

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	CONDUCTOR		131	0	104
	OPEN HOLE		112	1,300	1,400

Details of work:

Schlumberger pumped two, one hundred foot plugs. The first plug was pumped at the bottom of the hole at a depth of 1400' - 1300' which was open hole, no casing was set. The second plug was set in the conductor from 104' to surface.

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	

Comment:

This well only had 20" conductor set to a depth of 104' w/216 sks cement and had 17.5" open hole drilled to 1500'. The hole filled up with silt to 1400'. On 1/20/16, Dave Andrews verbally approved the plugging of this well and on 1/21/16 a follow up email was sent and confirmed. A form 42 was submitted for plugging, a form 4 and 6 were also submitted. This well was plugged with two one hundred foot plugs. One from 1400'-1300' and the other from 104'-0'.

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

Signed: _____ Print Name: Spence Laird

Title: Regulatory Supervisor Date: _____ Email: slaird@sandridgeenergy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400985754	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"/>
400985756	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<u>Other Attachments</u>			
400985759	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)