



State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109

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.

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COGCC

Complete the Attachment Checklist

1. OGCC Operator Number: 69175	4. Contact Name: Larry Robbins	OP OGCC	
2. Name of Operator: Petroleum Development Corporation	Phone: (303) 860-8522		
3. Address: 1775 Sherman Street, Suite 3000 City: Denver State: CO Zip: 80203	Fax: (303) 860-5838		
5. API Number: 05-123-26740	6. County: Weld	Logs	<input checked="" type="checkbox"/>
7. Well Name: Leffler	Well Number: 13-35	Directional Survey**	
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): NWSW Sec. 35 T7N R66W 6th PM		DST Analysis	
Footage at surface: 2170' <input checked="" type="checkbox"/> S 838' <input checked="" type="checkbox"/> W	As Drilled Latitude: 40.53025 <input checked="" type="checkbox"/> As Drilled Longitude: -104.75214 <input checked="" type="checkbox"/>	Core Analysis	
Date of Measurement: 01/16/09 <input checked="" type="checkbox"/> PDOP Reading: 1.8	GPS Instrument Operator's Name: Holly L. Tracy	Cmt summary*	
** If directional, footage at Top of Prod. Zone			
** If directional, footage at Bottom Hole			
9. Field Name: Eaton	10. Field Number: 19350	15. Well Classification	
11. Federal, Indian or State Lease Number: N/A		<input type="checkbox"/> Dry <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas	
12. Spud Date: (when the 1st bit hit the dirt) 12/17/2008 <input checked="" type="checkbox"/>	13. Date TD: 12/22/2008	<input type="checkbox"/> Coalbed <input type="checkbox"/> Disposal	
14. Date Casing Set or D&A: 12/23/2008		<input type="checkbox"/> Stratigraphic	
16. Total Depth MD 7573' <input checked="" type="checkbox"/> TVD**	17. Plug Back Total Depth MD 7524' <input checked="" type="checkbox"/> TVD**	<input type="checkbox"/> Enhanced Recovery	
18. Elevations GR 4875' <input checked="" type="checkbox"/> KB 4885' <input checked="" type="checkbox"/>	One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.	<input type="checkbox"/> Gas Storage	
19. List Electric Logs Run: CBL, CNL/CDL, Dual Induction		<input type="checkbox"/> Observation	
		Other:	

20.

CASING, LINER and CEMENT

*If Cement Bond Log was not run, submit contractor's cement job summary for each string cemented

String	Hole Size	Csg/Liner Size	Csg/Liner Top	Csg/Tool Setting Depth	Number of sacks cmt	Cement Top	Cement Bottom	CBL*	Calculated*
Conductor	N/A								
Surface	12 1/4"	8 5/8"	Surface	891'	630	Surface	891'		<input checked="" type="checkbox"/>
Production	7 7/8"	4 1/2"	Surface	7551'	190	6686'	7551'	<input checked="" type="checkbox"/>	
Stage, Squeeze, Remedial Cement Job				N/A	515	1458'	6686'	<input checked="" type="checkbox"/>	
Stage, Squeeze, Remedial Cement Job									
Stage, Squeeze, Remedial Cement Job									
Stage, Squeeze, Remedial Cement Job									
Liner									
Liner									

21.

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies	
	Top	Bottom	DST	Cored
Niobrara	7042'			
Ft. Hays	7317'			
Codell	7338'			

All DST and Core Analyses must be submitted to COGCC

COMMENTS

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

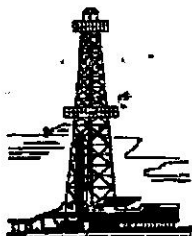
Print Name: Larry Robbins

E-mail: lrobbins@petd.com

Signature:

Title: Regulatory Agent

Date: 07/27/2009



CEMENTER'S WELL SERVICE, INC.
P.O. BOX 335220 • GREELEY, CO 80633 • (970) 353-7299 • FAX (970) 353-7712

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197113
COGCC

Date <u>12/18/08</u>	Well Owner <u>PDC</u>	Well No. <u>13-35</u>	Lease <u>Leffler</u>
County <u>Weld</u>	State <u>Colorado</u>	Field	
Charge to <u>EMSION US Drilling</u>	Charge Code		For Office Use Only
Address <u>P.O. Box 17805 (EMSION - 1)</u>			
City, State <u>Denver, CO 80217</u>			
Pump Truck No. <u>1202</u>	Code	Bulk Truck No. <u>1217/1214</u>	Code
Type of Job	Depth	Fl. <u>901</u>	To
<u>Surface 8 5/8" CSB- 24"</u>	Bottom of Surface	Fl. <u>891</u>	To
Plug	Plug Landed @ <u>874</u>	Fl. <u>891</u>	Time On <u>1230</u>
Production	Pipe Landed @ <u>891</u>	Fl. <u>891</u>	Time Off <u>Plug Down 1445</u>

Reference No.	Description	Qty.	Meas.	Unit Price	Amount		
	Pump Truck Charge						
	Cement Near ✓	1030	SKS				
	Poz. Mix						
	Calcium Chloride	390					
	Gel % Flo-Cele # #Per Sack						
	Handling Charge						
	Hauling Charge						
	Additional Cement						
8 5/8"	Centralizers	4		70.00			
	Cement basket	1					
	Guideshoe	1					
	Box threadlock	1					
<hr/>							
Mixing Rate	4 BPM/Displacement Rate 4 BPM						
Slurry Vol.	1.18 CU FT/SK-Slurry WT 15.2 PPG						
Remarks:	Pre-Flush w/30 BBL H ₂ O	Tax Reference Code	Sub Total				
	Displace w/55.5 BBL H ₂ O	State CO 2.7 %	Tax				
	Circulate 5 BBL Cement	Disc.	Total				
Truck No.	Code	State Mileage	Nebraska	Colorado	Wyoming	Other	Total Mileage
1202		Pump Truck		28			
1214/1217		Bulk Truck		22/22			

We do not assume any responsibility for any damage or conditions resulting from our services. All pricing is subject to review and revision.

Delivered By: Justin, Cason, Kenny

Received By: [Signature]
Customer or His Agent