

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



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Document Number:
401458748

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: 10433 Contact Name: MEL LACKIE
 Name of Operator: LARAMIE ENERGY LLC Phone: (303) 339-4400
 Address: 1401 SEVENTEENTH STREET #1400 Fax: (303) 339-4399
 City: DENVER State: CO Zip: 80202

API Number 05-077-10447-00 County: MESA
 Well Name: Bruton Well Number: 30-11W
 Location: QtrQtr: NENW Section: 30 Township: 9S Range: 93W Meridian: 6
 Footage at surface: Distance: 1024 feet Direction: FNL Distance: 1855 feet Direction: FWL
 As Drilled Latitude: 39.252572 As Drilled Longitude: -107.814333

GPS Data:
 Date of Measurement: 08/16/2017 PDOP Reading: 1.9 GPS Instrument Operator's Name: MARTIN PIERCE

** If directional footage at Top of Prod. Zone Dist.: 2665 feet. Direction: FNL Dist.: 1281 feet. Direction: FWL
 Sec: 30 Twp: 9S Rng: 93W

** If directional footage at Bottom Hole Dist.: 2665 feet. Direction: FNL Dist.: 1281 feet. Direction: FWL
 Sec: 30 Twp: 9S Rng: 93W

Field Name: BRUSH CREEK Field Number: 7562
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 10/30/2017 Date TD: 11/12/2017 Date Casing Set or D&A: 11/13/2017
 Rig Release Date: 11/22/2017 Per Rule 308A.b.

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

Total Depth MD 7937 TVD** 7642 Plug Back Total Depth MD 7835 TVD** 7540

Elevations GR 7512 KB 7542 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
RPM, PULSED NEUTRON, CBL, MUD

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	65	0	90	100	0	90	VISU
SURF	11	8+5/8	24	0	1,536	306	0	1,536	VISU
1ST	7+7/8	4+1/2	11.6	0	7,927	1,280	1,010	7,927	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	
OHIO CREEK	4,570				
WILLIAMS FORK	5,022				
CAMEO	6,993				
ROLLINS	7,632				

Comment:

NO OPEN HOLE LOGS RUN ON THIS WELL

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

Signed: _____

Print Name: MEL LACKIE _____

Title: ENGINEERING TECHNICIAN _____

Date: _____

Email: mlackie@laramie-energy.com _____

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401507865	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401507860	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"/>
Other Attachments			
401490219	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507859	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507864	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507872	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507874	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507877	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507879	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507884	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507888	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507890	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401510874	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401511250	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401521193	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)