

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:
401349981

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: <u>10456</u>	Contact Name: <u>Reed Haddock</u>
Name of Operator: <u>CAERUS PICEANCE LLC</u>	Phone: <u>(720) 880-6369</u>
Address: <u>1001 17TH STREET #1600</u>	Fax: <u>(303) 565-4606</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	

API Number <u>05-045-23393-00</u>	County: <u>GARFIELD</u>
Well Name: <u>Puckett</u>	Well Number: <u>34A-23 697</u>
Location: QtrQtr: <u>SESW</u> Section: <u>23</u> Township: <u>6S</u> Range: <u>97W</u> Meridian: <u>6</u>	
Footage at surface: Distance: <u>660</u> feet Direction: <u>FSL</u> Distance: <u>2498</u> feet Direction: <u>FWL</u>	
As Drilled Latitude: <u>39.503050</u> As Drilled Longitude: <u>-108.187886</u>	

GPS Data:
Date of Measurement: 02/13/2018 PDOP Reading: 1.2 GPS Instrument Operator's Name: Bart Hunting

** If directional footage at Top of Prod. Zone Dist.: 1677 feet. Direction: FSL Dist.: 1083 feet. Direction: FEL
Sec: 23 Twp: 6S Rng: 97W
** If directional footage at Bottom Hole Dist.: 1677 feet. Direction: FSL Dist.: 1083 feet. Direction: FEL
Sec: 23 Twp: 6S Rng: 97W

Field Name: GRAND VALLEY Field Number: 31290
Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 07/21/2017 Date TD: 07/26/2017 Date Casing Set or D&A: 07/27/2017
Rig Release Date: 12/09/2017 Per Rule 308A.b.

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

Total Depth MD 9437 TVD** 9101 Plug Back Total Depth MD 9359 TVD** 9023

Elevations GR 8432 KB 8462 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, PNL

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	53#	0	100	218	0	100	CALC
SURF	14+3/4	9+5/8	36#	0	2,482	865	0	2,482	CALC
1ST	8+3/4	4+1/2	11.6#	0	9,426	941	4,175	9,426	CALC

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	
GREEN RIVER	0	3,492	NO	NO	
WASATCH	3,492	4,743	NO	NO	
WASATCH G	4,743	5,032	NO	NO	
FORT UNION	5,032	6,374	NO	NO	
OHIO CREEK	6,374	6,568	NO	NO	
WILLIAMS FORK	6,568	8,762	NO	NO	
CAMEO	8,762	9,239	NO	NO	
ROLLINS	9,239		NO	NO	

Comment:

All casing and cement information and formation tops are measured from KB. Per the approved Form 2 APD for the subject well, one gamma ray and one resistivity log was required for this multi-well pad. Please refer to the open hole logs submitted with the Puckett 24A-23-697 (API# 05-045-23388).

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

Signed: _____

Print Name: Reed Haddock

Title: Sr. Regulatory Specialist

Date: _____

Email: rhaddock@caerusoilandgas.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401357274	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401357270	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			
401357273	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401530006	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401530007	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401530008	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401530010	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401546596	WELL LOCATION PLAT	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)