

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:
401554590

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>74165</u>	Contact Name: <u>Edward Ingve</u>
Name of Operator: <u>RENEGADE OIL & GAS COMPANY LLC</u>	Phone: <u>(303) 829-2354</u>
Address: <u>6155 S MAIN STREET #210</u>	Fax: <u>(303) 680-4907</u>
City: <u>AURORA</u> State: <u>CO</u> Zip: <u>80016</u>	

API Number <u>05-005-06928-00</u>	County: <u>ARAPAHOE</u>
Well Name: <u>COX</u>	Well Number: <u>1-8</u>
Location: QtrQtr: <u>NESW</u> Section: <u>8</u> Township: <u>5S</u> Range: <u>62W</u> Meridian: <u>6</u>	
Footage at surface: Distance: <u>1980</u> feet Direction: <u>FSL</u> Distance: <u>1980</u> feet Direction: <u>FWL</u>	
As Drilled Latitude: <u>39.627960</u> As Drilled Longitude: <u>-104.353680</u>	

GPS Data:
Date of Measurement: 09/29/2010 PDOP Reading: 3.1 GPS Instrument Operator's Name: Keith Westfall

** 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: DRAGOON Field Number: 18850
Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 08/15/1985 Date TD: 08/22/1985 Date Casing Set or D&A: 08/24/1985
Rig Release Date: 08/24/1985 Per Rule 308A.b.

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

Total Depth MD 7585 TVD** _____ Plug Back Total Depth MD 7552 TVD** _____

Elevations GR 5601 KB 5611 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
Dual Induction-SP (8/22/1985), CD-DSN-GR (8/22/1985), Micro-GR (8/22/1985), CBL-CCL-GR (9/7/1985), CBL-CCL-GR (10/11/2010 & 10/28/2010)

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
SURF	12+1/4	8+5/8	24	0	219	175	0	175	VISU
1ST	7+7/8	4+1/2	10.5&11.6	0	7,587	200	6,930	7,587	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 10/12/2010

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
1 INCH	1ST	700	180	175	710
SQUEEZE	1ST	2,677	650	2,010	2,755
STAGE TOOL	1ST	1,439	100	990	1,475
SQUEEZE	1ST	2,600	50		

Details of work:

10/3/1985 - Initial completion work indicated sliding sleeve at 1439' opened and 100 sacks Halco Lite placed. Sleeve closed and pressure tested successfully. CBL from 10/11/2010 indicated cement placed from 990' to 1475'.
 10/12/2010 - On the same day 180 sacks was placed via 700 feet of 1" tubing down bradenhead and 650 sacks were squeezed down 4 1/2" production casing to repair casing from 2419' to 2677'. CBL from 10/28/2010 indicated cement placement from 2010' to 2755'.
 10/20/2010 - A 50 sack balanced plug was placed accross the interval of pipe from 2700' to 1900' and displaced with 5+ barrels. Coverage of this job is included in the CBL placement from the 10/28/2010 log.

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:

Form 5 is being submitted for the Cox #1-8 as a result of a file review which was undertaken because of a recent workover. Cement work which took place in 10/2010 was never fully documented after finalized. A Form 4 for proposed work was faxed to Stewart Allsworth on 10/11/2010 but never posted to the well's document history. A field inspection report from Jim Precup of the COGCC has been attached to this Form 5 as confirmation of the work performed. There is no electronic copy of the CBL run after cementing so a paper copy is being submitted.

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

Signed: _____ Print Name: Edward Ingve

Title: Manager/Owner Date: _____ Email: ed@renegadeoilandgas.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401554927	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"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Other Attachments			
401555276	OPERATIONS SUMMARY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

--

--

Stamp Upon Approval

Total: 0 comment(s)