

FORM  
5Rev  
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: 74165

Contact Name: Edward Ingve

Name of Operator: RENEGADE OIL &amp; GAS COMPANY LLC

Phone: (303) 829-2354

Address: 6155 S MAIN STREET #210

Fax: (303) 680-4907

City: AURORA State: CO Zip: 80016

API Number 05-005-06928-00

County: ARAPAHOE

Well Name: COX

Well Number: 1-8

Location: QtrQtr: NESW Section: 8 Township: 5S Range: 62W Meridian: 6

Footage at surface: Distance: 1980 feet Direction: FSL Distance: 1980 feet Direction: FWL

As Drilled Latitude: 39.627960 As Drilled Longitude: -104.353680

## 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: DRAGON

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&amp;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 &amp; 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 ?			
<u>Attachment Checklist</u>					
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"/>
<u>Other Attachments</u>					
401555276	OPERATIONS SUMMARY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

### General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)