

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



Document Number:

401467819

Date Received:

02/14/2018

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type Final completion Preliminary completion

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

API Number 05-045-23395-00 County: GARFIELD
Well Name: Puckett Well Number: 11B-26 697
Location: QtrQtr: SESW Section: 23 Township: 6S Range: 97W Meridian: 6
Footage at surface: Distance: 657 feet Direction: FSL Distance: 2485 feet Direction: FWL
As Drilled Latitude: 39.503042 As Drilled Longitude: -108.187931

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.: 441 feet Direction: FNL Dist.: 441 feet Direction: FWL
Sec: 26 Twp: 6S Rng: 97W

** If directional footage at Bottom Hole Dist.: 512 feet Direction: FNL Dist.: 223 feet Direction: FWL
Sec: 26 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) 11/25/2017 Date TD: 11/30/2017 Date Casing Set or D&A: 12/01/2017
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 9360 TVD** 8914 Plug Back Total Depth MD 9325 TVD** 8879

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	2,521	947	0	2,521	CALC
1ST	8+3/4	4+1/2	11.6	0	9,325	941	4,000	9,325	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	3,497	NO	NO	
WASATCH	3,497	4,691	NO	NO	
WASATCH G	4,691	4,987	NO	NO	
FORT UNION	4,987	6,254	NO	NO	
OHIO CREEK	6,254	6,443	NO	NO	
WILLIAMS FORK	6,443	8,632	NO	NO	
CAMEO	8,632	9,096	NO	NO	
ROLLINS	9,096		NO	NO	

Operator Comments

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: 2/14/2018 Email: rhaddock@caerusoilandgas.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
401469049	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401473510	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"/>
<u>Other Attachments</u>			
401467819	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401473511	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401529649	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401529653	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401529700	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401529701	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401545210	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>
Engineering Tech	Corrected cement pumped in surface string per cement job summary	04/16/2018
Permit	-Corrected TPZ per spreadsheet from Reed Haddock should be confirmed when 5A is submitted	04/16/2018

Total: 2 comment(s)