

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



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Document Number:

401729013

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 05-045-23797-00

County: GARFIELD

Well Name: CC

Well Number: 0697-03-17E

Location: QtrQtr: Lot 11 Section: 3 Township: 6S Range: 97W Meridian: 6

Footage at surface: Distance: 2246 feet Direction: FNL Distance: 2351 feet Direction: FEL

As Drilled Latitude: 39.558216 As Drilled Longitude: -108.205129

## GPS Data:

Date of Measurement: 06/23/2017 PDOP Reading: 1.3 GPS Instrument Operator's Name: T SHERRILL

\*\* If directional footage at Top of Prod. Zone Dist.: 3092 feet. Direction: FSL Dist.: 1312 feet. Direction: FEL

Sec: 3 Twp: 6S Rng: 97W

\*\* If directional footage at Bottom Hole Dist.: 3092 feet. Direction: FSL Dist.: 1312 feet. Direction: FEL

Sec: 3 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) 08/03/2018 Date TD: 08/07/2018 Date Casing Set or D&amp;A: 08/08/2018

Rig Release Date: 08/09/2018 Per Rule 308A.b.

## Well Classification:

☐ Dry ☐ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 7883 TVD\*\* 7492 Plug Back Total Depth MD 7787 TVD\*\* 7396

Elevations GR 8428 KB 8458 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

ORIGINAL HOLE CLASSIFIED 'ABANDONED' PER SCOUT CARD NO LOGS RUN PBDT ESTIMATED FROM CC 0697 03-16E (API# 0504523816)

## 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	18	47.44	0	80	100	0	80	VISU
SURF	14+3/4	9+5/8	36	0	2,575	1,307	0	2,575	

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 08/04/2018

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	SURF		115		

Details of work:

TOP JOB 115 SXS OF 15.6 PPG NEAT G AND HELD SOLID

**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:

DRILLED TO 7883' WHEN STRING PACKED OFF AND LOST CIRCULATION DUE TO RIG DOWNTIME. BACK REAMED OUT OF HOLE TO 4550' MD. TIGHT SPOTS AT 7680', 6780', 5200', 4980'. ATTEMPTED TO WASH AND REAM HOLE, HIT SOLID BRIDGE AT 4850'. HOLE UNLOADING AND APPEARS TO HAVE COLLAPSED RESULTING IN UNPLANNED SIDETRACK. REQUESTED ONE ABANDONMENT PLUG FROM 3900'-4500' AND ONE PLUG FROM 3800'-3200'.

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 ?			
<u>Attachment Checklist</u>					
401732547	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>					
401729442	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401729444	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401729447	CORRESPONDENCE	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401729457	CORRESPONDENCE	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)