

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:

401991471

Date Received:

04/01/2019

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: 18600 Contact Name: Anthony Trinko  
Name of Operator: COLORADO INTERSTATE GAS COMPANY LLC Phone: (719) 520-4557  
Address: P O BOX 1087 Fax:  
City: COLORADO State: CO Zip: 80944

API Number 05-009-06482-00 County: BACA  
Well Name: FLANK Well Number: 70  
Location: QtrQtr: NESE Section: 8 Township: 34S Range: 42W Meridian: 6  
Footage at surface: Distance: 1980 feet Direction: FSL Distance: 660 feet Direction: FEL  
As Drilled Latitude: 37.096388 As Drilled Longitude: -102.183427

GPS Data:  
Date of Measurement: 09/24/2009 PDOP Reading: 3.9 GPS Instrument Operator's Name: G. H. Jarrell

\*\* 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: FLANK Field Number: 24051  
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 05/20/1990 Date TD: 05/28/1990 Date Casing Set or D&A: 05/29/1990  
Rig Release Date: 05/29/1990 Per Rule 308A.b.

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

Total Depth MD 4683 TVD\*\* Plug Back Total Depth MD 4629 TVD\*\*

Elevations GR 3686 KB 3686 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:  
CBL

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	1,355	900	0	1,355	VISU
1ST	7+7/8	5+1/2	15.5	0	4,673	1,025	3,365	4,673	CBL

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	
NEVA	2,533				
WABAUNSEE	2,815				
TOPEKA	2,859				
LANSING	3,449				
MARMATON	3,782				
CHEROKEE	3,988				
ATOKA	4,227				
MORROW	4,390				

Operator Comments

\_\_\_\_\_

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

Signed: \_\_\_\_\_ Print Name: Anthony P. Trinko

Title: Sr. Reservoir Engineer Date: 4/1/2019 Email: anthony\_trinko@kindermorgan.com

### **Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
	CMT Summary *	Yes <input type="checkbox"/>	No <input checked="" 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"/>
<b>Other Attachments</b>			
401991471	DRILLING COMPLETION REPORT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401991548	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402033205	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Engineering Tech	Corrected 1st string casing cement top per CBL (doc #616218)	05/06/2019

Total: 1 comment(s)

