

FORM
5

Rev
10/14

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:

402194882

Date Received:

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/or 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: 10433 Contact Name: Joan Proulx
Name of Operator: LARAMIE ENERGY LLC Phone: (970) 263-3641
Address: 1401 SEVENTEENTH STREET #1401 Fax: _____
City: DENVER State: CO Zip: 80202 Email: jproulx@laramie-energy.com

API Number 05-045-23931-00 County: GARFIELD
Well Name: CC Federal Well Number: 0697-03-06W
Location: QtrQtr: Lot 12 Section: 4 Township: 6S Range: 97W Meridian: 6
FNL/FSL FEL/FWL
Footage at surface: Distance: 1917 feet Direction: FNL Distance: 925 feet Direction: FEL
As Drilled Latitude: 39.557562 As Drilled Longitude: -108.218760

GPS Data:

Date of Measurement: 08/30/2019 PDOP Reading: 2.4 GPS Instrument Operator's Name: T Sherrill
FNL/FSL FEL/FWL

** If directional footage at Top of Prod. Zone Dist: 1331 feet Direction: FNL Dist: 1337 feet Direction: FWL
Sec: 3 Twp: 6S Rng: 97W

** If directional footage at Bottom Hole Dist: 1346 feet Direction: FNL Dist: 1292 feet Direction: FWL
Sec: 3 Twp: 6S Rng: 97W

Field Name: GRAND VALLEY Field Number: 31290

Federal, Indian or State Lease Number: COC 056830

Spud Date: (when the 1st bit hit the dirt) 07/29/2019 Date TD: 08/02/2019 Date Casing Set or D&A: 08/02/2019

Rig Release Date: 08/29/2019 Per Rule 308A.b.

Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 10666 TVD** 10181 Plug Back Total Depth MD 10611 TVD** 10121

Elevations GR 8609 KB 8639 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:

Emulation (Pulsed Neutron, Emulated OH Log), PN (Pulsed Neutron, Gamma Ray, Casing Collar), RBL (Radial Cement Bond, Gamma Ray, Casing Collar), Mud

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	16	36.9	0	80	100	0	80	CALC
SURF	14+3/4	9+5/8	36	0	2,580	1,130	0	2,580	CALC
1ST	8+3/4	4+1/2	11.6	0	10,656	1,772	3,584	10,656	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	SURF		420	0	2,580

Details of work:

8/3/19 Pumped 6.3 bbls, 30 sxs, 15.6 ppg on parasite line.

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	
WASATCH	3,274	5,047	NO	NO	
WASATCH G	5,047	5,738	NO	NO	
FORT UNION	5,738	7,034	NO	NO	
OHIO CREEK	7,034	7,469	NO	NO	
WILLIAMS FORK	7,469	9,530	NO	NO	
CAMEO	9,530	9,976	NO	NO	
ROLLINS	9,976	10,213	NO	NO	
COZZETTE	10,213	10,451	NO	NO	
CORCORAN	10,451		NO	NO	

Operator Comments:

No open-hole logs were run in this well. Open-hole logs were run in the CC 0697-04-08E, 045-23987: Sandstone_Caliper (Resistivity, GR, Caliper), Sandstone Induction (Induction, GR), Sandstone_Nuclear (Thermal Neutron Porosity, GR, Caliper), Sandstone TCOM (Triple Combo)

A 1.90" 2.75# J-55 parasite string was set with the mandrel at 2,458'.

TPZ is estimated at the TOG estimate of 8079' as the well has not yet been completed. The estimated completion date for the well is prior to 12/15/2019. The actual TPZ footages will be provided on the Form 5A comments after the well is completed.

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

Signed: _____

Print Name: Joan Proulx

Title: Regulatory Analyst

Date: _____

Email: jproulx@laramie-energy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402194900	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402194908	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>			
402194911	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402194912	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402194914	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402194915	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402194917	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402194918	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402194922	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402194926	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

