

FORM
5Rev
02/20**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:

402192534

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: 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

Email: rhaddock@caerusoilandgas.com

API Number 05-045-21892-00

County: GARFIELD

Well Name: SG

Well Number: 24A-27-496

Location: QtrQtr: NWSW Section: 27 Township: 4S Range: 96W Meridian: 6
FNL/FSL FEL/FWL

Footage at surface: Distance: 1870 feet Direction: FSL Distance: 1104 feet Direction: FWL

As Drilled Latitude: 39.671196 As Drilled Longitude: -108.160210

GPS Data: GPS Quality Value: 1.3 Type of GPS Quality Value: PDOP Date of Measurement: 03/09/2020

GPS Instrument Operator's Name: Dennis Petty

FNL/FSL

FEL/FWL

** If directional footage at Top of Prod. Zone Dist: 2480 feet Direction: FNL Dist: 1917 feet Direction: FEL
Sec: 27 Twp: 4S Rng: 96W

FNL/FSL

FEL/FWL

** If directional footage at Bottom Hole Dist: 2531 feet Direction: FNL Dist: 2006 feet Direction: FEL
Sec: 27 Twp: 4S Rng: 96W

Field Name: GRAND VALLEY

Field Number: 31290

Federal, Indian or State Lease Number: COC064814

Spud Date: (when the 1st bit hit the dirt) 09/29/2019 Date TD: 10/06/2019 Date Casing Set or D&A: 10/07/2019

Rig Release Date: 03/10/2020 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 12047 TVD** 11637 Plug Back Total Depth MD 11985 TVD** 11575

Elevations GR 8106 KB 8136

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	54#	0	100	218	0	100	VISU
SURF	14+3/4	9+5/8	36#	0	2,998	764	0	2,998	VISU
1ST	8+3/4	4+1/2	11.6#	0	12,031	1,780	5,021	12,031	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	
GREEN RIVER	0	3,137	NO	NO	
WASATCH	3,137	5,831	NO	NO	
WASATCH G	5,831	6,225	NO	NO	
FORT UNION	6,225	8,320	NO	NO	
OHIO CREEK	8,320	8,592	NO	NO	
WILLIAMS FORK	8,592	11,310	NO	NO	
CAMEO	11,310	11,877	NO	NO	
ROLLINS	11,877		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 SG 15B-27-496 (API# 05-045-21883).

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

Signed: _____

Print Name: Reed HaddockTitle: Sr. Regulatory Specialist Date: _____ Email: rhaddock@caerusoilandgas.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402201170	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402351383	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>			
402201178	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402349760	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402349762	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402349764	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402349765	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402351382	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)

