

FORM  
5Rev  
12/20

## 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:

403229799

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: 96850

Contact Name: Melissa Luke

Name of Operator: TEP ROCKY MOUNTAIN LLC

Phone: (970) 263-2727

Address: 1058 COUNTY ROAD 215

Fax:

City: PARACHUTE

State: CO

Zip: 81635

Email: mluke@terraep.com

API Number 05-103-12477-00

County: RIO BLANCO

Well Name: FEDERAL

Well Number: RG 12-18-297

Location: QtrQtr: LOT 15 Section: 7 Township: 2S Range: 97W Meridian: 6  
FNL/FSL FEL/FWL

Footage at surface: Distance: 1794 feet Direction: FSL Distance: 1372 feet Direction: FWL

As Drilled Latitude: 39.888506 As Drilled Longitude: -108.328951

GPS Data: GPS Quality Value: 1.3 Type of GPS Quality Value: PDOP Date of Measurement: 11/15/2021

\*\* If directional footage at Top of Prod. Zone Dist: feet Direction: Dist: feet Direction:  
Sec: Twp: Rng: FNL/FSL FEL/FWL\*\* If directional footage at Bottom Hole Dist: feet Direction: Dist: feet Direction:  
Sec: Twp: Rng: FNL/FSL FEL/FWL

Field Name: LOVE RANCH

Field Number: 51850

Federal, Indian or State Lease Number: COC0003453

Spud Date: (when the 1st bit hit the dirt) 08/16/2022 Date TD: Date Casing Set or D&amp;A:

Rig Release Date: 08/17/2022 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 1368 TVD\*\* Plug Back Total Depth MD TVD\*\*

Elevations GR 6603 KB 6617

Digital Copies of ALL Logs must be Attached ☐

List All Logs Run:

NA

## FLUID VOLUMES USED IN DRILLING OPERATIONS

(Enter "0" if a type of a fluid was not used. Do not leave blank.)

Total Fluids (bbls): Fresh Water (bbls):

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls):

**CASING, LINER AND CEMENT**

| Casing Type | Size of Hole | Size of Casing | Grade | Wt/Ft | Csg/Liner Top | Setting Depth | Sacks Cmt | Cmt Btm | Cmt Top | Status |
|-------------|--------------|----------------|-------|-------|---------------|---------------|-----------|---------|---------|--------|
| CONDUCTOR   | 30           | 20             | X52   | 52.78 | 0             | 89            | 211       | 89      | 0       | VISU   |
| SURF        | 17+1/2       | 13+3/8         | J55   | 54.5  | 0             | 1358          | 578       | 1358    | 0       | VISU   |

Bradenhead Pressure Action Threshold 407 psig

This threshold is calculated per Rule 308A.b.(2)G. If this well is located in a bradenhead test area (see Rule 207.b) per an Order of the Commission, it may be subject to a different threshold.

Does the casing centralization comply with Rule 317.g? Yes

If "NO", provide details below.

**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 |   |
|                |                |        |                  |       |   |

Operator Comments:

Drilling operations were suspended on the Federal RG 12-18-297 well on 08/17/2022 to drill and set casing prior to the Form 2 expiration date. The anticipated date for resuming operations will be April 2023. Please see attached Operations Summary, Directional Survey, and Cement Report.

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

Signed: \_\_\_\_\_ Print Name: Melissa LukeTitle: Regulatory Specialist Date: \_\_\_\_\_ Email: mluke@terraep.com

### Attachment Check List

| Att Doc Num                 | Document Name         | attached ?                              |  |
|-----------------------------|-----------------------|---|--|
| <u>Attachment Checklist</u> |                       |   |  |
| 403463364                   | CMT Summary *         | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
|                             | Core Analysis         | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| 403230948                   | 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 type="checkbox"/>            | No <input checked="" type="checkbox"/> |
|                             | Other                 | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| <u>Other Attachments</u>    |                       |   |  |
| 403235321                   | DIRECTIONAL DATA      | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| 403463360                   | OPERATIONS SUMMARY    | 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)