

FORM
5Rev
02/08**State of Colorado**
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400191206

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

1. OGCC Operator Number: 10091

2. Name of Operator: BERRY PETROLEUM COMPANY

3. Address: 1999 BROADWAY STE 3700

City: DENVER State: CO Zip: 80202

4. Contact Name: Julie Pyle

Phone: (303) 999-4227

Fax: (303) 999-4327

5. API Number 05-045-19591-00

6. County: GARFIELD

7. Well Name: CHEVRON

Well Number: 19-21D

8. Location: QtrQtr: LOT 1 Section: 19 Township: 5S Range: 96W Meridian: 6

Footage at surface: Distance: 414 feet Direction: FNL Distance: 1365 feet Direction: FWL

As Drilled Latitude: 39.606722 As Drilled Longitude: -108.212705

GPS Data:

Data of Measurement: 06/22/2010 PDOP Reading: 2.6 GPS Instrument Operator's Name: IVAN MARTIN

** If directional footage

at Top of Prod. Zone Distance: 166 feet Direction: FNL Distance: 790 feet Direction: FWL

Sec: 19 Twp: 5S Rng: 96W

at Bottom Hole Distance: 166 feet Direction: FNL Distance: 790 feet Direction: FWL

Sec: 19 Twp: 5S Rng: 96W

9. Field Name: GRAND VALLEY

10. Field Number: 31290

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 06/27/2010 13. Date TD: 07/07/2010 14. Date Casing Set or D&A: 07/08/2010

15. Well Classification:

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

16. Total Depth MD 10140 TVD 10088 17 Plug Back Total Depth MD 9832 TVD 10057

18. Elevations GR 8538 KB 8561

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

RST, CBL

20. Casing, Liner and Cement:

CASING

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		0	100	350	0	100	CALC
SURF	16	9+5/8		0	2,055	1,765	100	2,055	CALC
1ST	8+3/4	4+1/2		0					CBL
2ND	7+7/8	4+1/2		0	9,906	606	9,800	9,832	CBL

ADDITIONAL CEMENT

Cement work date: _____

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
OHIO CREEK	6,621	6,988	<input type="checkbox"/>	<input type="checkbox"/>	
WILLIAMS FORK	6,988	9,615	<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	9,615	9,982	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	9,982	10,140	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: _____ Print Name: JULIE PYLE

Title: GEOLOGIST Date: 5/18/2011 Email: JLP@BRY.COM

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group Comment Comment Date

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Total: 0 comment(s)