

**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:

402160183

Date Received:

08/28/2019

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/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: 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 SPRINGS State: CO Zip: 80944

Email: anthony_trinko@kindermorgan.com

API Number 05-005-06747-00

County: ARAPAHOE

Well Name: LATIGO

Well Number: 25

Location: QtrQtr: SWSW Section: 13 Township: 5S Range: 61W Meridian: 6
FNL/FSL FEL/FWL

Footage at surface: Distance: 660 feet Direction: FSL Distance: 660 feet Direction: FWL

As Drilled Latitude: 39.610680 As Drilled Longitude: -104.171350

GPS Data:

Date of Measurement: 09/29/2010 PDOP Reading: 2.9 GPS Instrument Operator's Name: G.H. Jarrell

FNL/FSL

FEL/FWL

** 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:

Field Name: LATIGO

Field Number: 48500

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 03/27/1977 Date TD: 04/03/1977 Date Casing Set or D&A: 04/05/1977

Rig Release Date: 04/06/1977 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 6875 TVD** Plug Back Total Depth MD 6851 TVD**

Elevations GR 5465 KB 5465

Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

IND, NEU, TEMP

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	17+1/4	13+3/8	54.5	0	121				
1ST		9+5/8	36	0	82				
2ND	7+7/8	5+1/2	15.5	0	6,865	1,633	2,068	6,875	CBL
TAPER	12+1/4	8+5/8	24	121	1,015	600	0	1,015	VISU

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	
PIERRE	778				
HYGIENE	3,832				
NIOBRARA	5,890				
FORT HAYS	6,257				
CODELL	6,286				
CARLILE	6,298				
GREENHORN	6,364				
GRANEROS	6,443				
D SAND	6,682				
HUNTSMAN	6,695				
J SAND	6,734				

Operator Comments:

This Form 5 is being submitted in response to a July 26, 2018 data request for a new Drilling Completion Report for wells that have not had one filed since 1999.

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: 8/28/2019 Email: anthony_trinko@kindermorgan.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
	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 checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
402160183	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402160201	PDF-TEMPERATURE	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402160255	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	List of all logs run was edited Corrected casing type nomenclature to reflect WBD. Corrected 2nd string csg top per WBD. Corrected 2nd string cement bottom to TD	11/12/2019

Total: 1 comment(s)

