

**FORM**  
**5**Rev  
02/08State 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:

2512182

**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: 8960 4. Contact Name: KERRY MCCOWEN  
2. Name of Operator: BONANZA CREEK ENERGY OPERATING COMPAN Phone: (720) 2792330  
3. Address: P O BOX 21974 Fax: \_\_\_\_\_  
City: BAKERSFIELD State: CA Zip: 93390

5. API Number 05-123-31484-00 6. County: WELD  
7. Well Name: 70 Ranch Well Number: 23-27  
8. Location: QtrQtr: NESW Section: 27 Township: 5N Range: 63W Meridian: 6  
Footage at surface: Distance: 1931 feet Direction: FSL Distance: 1980 feet Direction: FWL  
As Drilled Latitude: 40.368390 As Drilled Longitude: -104.424060

## GPS Data:

Data of Measurement: 08/18/2010 PDOP Reading: 2.6 GPS Instrument Operator's Name: LARRY ROBBINS

## \*\* If directional footage

at Top of Prod. Zone Distance: \_\_\_\_\_ feet Direction: \_\_\_\_\_ Distance: \_\_\_\_\_ feet Direction: \_\_\_\_\_  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_  
at Bottom Hole Distance: \_\_\_\_\_ feet Direction: \_\_\_\_\_ Distance: \_\_\_\_\_ feet Direction: \_\_\_\_\_  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_

9. Field Name: WATTENBERG 10. Field Number: 90750

11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 07/08/2010 13. Date TD: 07/12/2010 14. Date Casing Set or D&A: 07/11/2010

## 15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 6669 TVD \_\_\_\_\_ 17 Plug Back Total Depth MD 6625 TVD \_\_\_\_\_18. Elevations GR 4544 KB 4554

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:

CD, CN, DI, CBL, GR

## 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
SURF	12+1/4	8+5/8		0	493	430	0	493	CALC
1ST	7+7/8	4+1/2		0	6,655	251	2,740	6,655	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	
SUSSEX	3,972		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,253		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	6,476		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	6,499		<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: KERRY A MCCOWEN

Title: VP OPERATIONS.RM Date: 8/24/2010 Email: KAM@BONANZACRK.COM

### Attachment Check List

Att Doc Num	Name
2072068	CEMENT JOB SUMMARY
2512182	FORM 5 SUBMITTED

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	req digital CBL	12/13/2010 3:24:27 PM

Total: 1 comment(s)