IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

FORM 5 Rev 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 **DRILLING COMPLETION REPORT**		DE	ET	OE	ES	

		Document Number: 2591821

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   [X] 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) 279-2330

3. Address: P O BOX 21974

Fax: (720) 279-2331

City: BAKERSFIELD   State: CA   Zip: 93390

5. API Number   05-123-31856-00

6. County: WELD

7. Well Name: Antelope   Well Number: 43-18

8. Location: QtrQtr: NESE   Section: 18   Township: 5N   Range: 62W   Meridian: 6

Footage at surface: Distance: 1376   feet   Direction: FSL   Distance: 764   feet   Direction: FEL

As Drilled Latitude: 40.395940   As Drilled Longitude: -104.359280

GPS Data:

Data of Measurement: 12/05/2010   PDOP Reading: 2.4   GPS Instrument Operator's Name: LARRY ROBBINS

** If directional footage at Top of Prod. Zone   Dist.: 1980 feet. Direction: FSL   Dist.: 674 feet. Direction: FEL

Sec: 18   Twp: 5N   Rng: 62W

** If directional footage at Bottom Hole   Dist.: 1980 feet. Direction: FSL   Dist.: 674 feet. Direction: FEL

Sec: 18   Twp: 5N   Rng: 62W

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) 11/08/2010   13. Date TD: 11/11/2010   14. Date Casing Set or D&A: 11/13/2010

15. Well Classification:

[ ] Dry   [ ] Oil   [X] Gas/Coalbed   [ ] Disposal   [ ] Stratigraphic   [ ] Enhanced Recovery   [ ] Storage   [ ] Observation

16. Total Depth   MD   6710   TVD** 6671   17 Plug Back Total Depth   MD   6680   TVD** 6641

18. Elevations   GR   4647   KB   4657   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:

CBL, GR, CD, CN, DI

20. Casing, Liner and Cement:

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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	453	330	0	453	CALC
1ST	7+7/8	4+1/2		0	6,680	388	3,280	6,680	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 Top	Measured Depth Bottom	Check if applies DST	Check if applies Cored	COMMENTS (All DST and Core Analyses must be submitted to COGCC)
PARKMAN	3,406		☐	☐	
SUSSEX	4,235		☐	☐	
SHANNON	5,753		☐	☐	
NIOBRARA	6,255		☐	☐	
FORT HAYS	6,485		☐	☐	
CODELL	6,509		☐	☐	

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 MCGOWEN

Title: V.P. OPERATIONS - RM   Date: 12/15/2010   Email: KAM@BONANAZACRK.COM

Attachment Check List

Att Doc Num	Document Name	attached ?

Attachment Checklist

Att Doc Num	Document Name	attached ?		
2591823	CMT Summary *	Yes ☒	No ☐
	Core Analysis	Yes ☐	No ☒
2591822	Directional Survey **	Yes ☒	No ☐
	DST Analysis	Yes ☐	No ☒
	Logs	Yes ☐	No ☒
	Other	Yes ☐	No ☒

Other Attachments

Att Doc Num	Document Name	attached ?		
2591821	FORM 5 SUBMITTED	Yes ☒	No ☐

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)