

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:

2285358

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 COMPANY

Phone: (720) 440-6100

3. Address: P O BOX 21974

Fax: (720) 279-2331

City: BAKERSFIELD State: CA Zip: 93390

5. API Number 05-057-06509-00

6. County: JACKSON

7. Well Name: Moore State

Well Number: 2-36

8. Location: QtrQtr: NWSW Section: 36 Township: 8N Range: 78W Meridian: 6

Footage at surface: Distance: 2389 feet Direction: FSL Distance: 572 feet Direction: FWL

As Drilled Latitude: 40.619110 As Drilled Longitude: -106.101560

GPS Data:

Date of Measurement: 09/09/2011 PDOP Reading: 2.7 GPS Instrument Operator's Name: R. SHAW

** If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

** If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number: 7988

12. Spud Date: (when the 1st bit hit the dirt) 07/03/2011 13. Date TD: 07/30/2011 14. Date Casing Set or D&A:

15. Well Classification:

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

16. Total Depth MD 9162 TVD** 17 Plug Back Total Depth MD TVD**

18. Elevations GR 8498 KB 8510

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:

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	36	24		0	43	8	0	43	CALC
SURF	12+1/2	9+5/8		0	1,018	125	0	1,018	CALC

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
STAGE TOOL	1ST	7,776	75	7,776	8,005
STAGE TOOL	S.C. 1.1	629	50	629	758

Details of work:

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	
WASATCH G	2,455		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	4,714		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	7,384		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,861		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FORM 5A DOC # 2285331

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 Date: 10/21/2011 Email: KAM@BONANZACRK.COM

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
2285359	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input 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 type="checkbox"/> No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<u>Other Attachments</u>		
2285358	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	REQ MWD/FMI LOGS	11/28/2011 10:29:20 AM
Data Entry	CHECK CASING LINER AND CEMENT OH PLUG AND SURF PLUG ENTERED IN STAGE/TOP OUT/REMEDIAL CEMENT.	11/25/2011 10:41:45 AM

Total: 2 comment(s)