

FORM
5

Rev
02/08

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400267771

Date Received:

05/14/2012

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
2. Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY
3. Address: 410 17TH STREET SUITE #1400
City: DENVER State: CO Zip: 80202
4. Contact Name: Bryan Brown
Phone: (720) 440-6100
Fax: (720) 279-2331

5. API Number 05-123-35135-00
6. County: WELD
7. Well Name: Antelope
Well Number: X-19
8. Location: QtrQtr: SENE Section: 19 Township: 5N Range: 62W Meridian: 6
Footage at surface: Distance: 2041 feet Direction: FNL Distance: 665 feet Direction: FEL
As Drilled Latitude: 40.386570 As Drilled Longitude: -104.359010

GPS Data:

Date of Measurement: 04/26/2012 PDOP Reading: 1.7 GPS Instrument Operator's Name: Adam Kelly

** If directional footage at Top of Prod. Zone Dist.: 1399 feet. Direction: FSL Dist.: 97 feet. Direction: FEL

Sec: 19 Twp: 5N Rng: 62W

** If directional footage at Bottom Hole Dist.: 1389 feet. Direction: FNL Dist.: 84 feet. Direction: FEL

Sec: 19 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) 03/08/2012 13. Date TD: 03/11/2012 14. Date Casing Set or D&A: 03/12/2012

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 7110 TVD** 6739 17 Plug Back Total Depth MD 7087 TVD** 6716

18. Elevations GR 4651 KB 4661

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, GAMMA RAY, HRI, CDL, CNL

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 | 24 | 0 | 481 | 340 | 0 | 481 | CALC |
| 1ST | 7+7/8 | 4+1/2 | 11.6 | 0 | 7,087 | 495 | 2,330 | 7,110 | CBL |

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:

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 | |
| SHARON SPRINGS | 5,943 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| NIOBRARA | 6,285 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| FORT HAYS | 6,515 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| CODELL | 6,539 | | <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: BRYAN BROWN

Title: DRILLING EIT Date: 5/14/2012 Email: bbrown@bonanzacrk.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|------------------------|---|--|
| Attachment Checklist | | | |
| 400281918 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 400284562 | Directional Survey ** | Yes <input checked="" type="checkbox"/> | No <input 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"/> |
| Other Attachments | | | |
| 400267771 | FORM 5 SUBMITTED | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400267784 | LAS-TRIPLE COMBINATION | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400284561 | DIRECTIONAL DATA | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400284563 | LAS-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400336021 | DIRECTIONAL DATA | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

General Comments

| User Group | Comment | Comment Date |
|------------|--|--------------------------|
| Permit | Off Hold. Per operator input TOP, BHL, logs run, and directional template. | 10/11/2012 4:01:41 PM |
| Permit | On Hold. Requested logs run, Top of production, BHL, and formation at TD. | 9/24/2012 2:32:36 PM |
| Permit | On Hold. Requested logs run, Top of production, BHL, and formation at TD. | 3/6/2012 8:18:11 AM |

Total: 3 comment(s)