

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:

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Date Received:

## 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: 69175 4. Contact Name: Christine Brookshire  
 2. Name of Operator: PDC ENERGY INC Phone: (303) 860-5800  
 3. Address: 1775 SHERMAN STREET - STE 3000 Fax: (303) 860-5838  
 City: DENVER State: CO Zip: 80203

5. API Number 05-123-36100-00 6. County: WELD  
 7. Well Name: Dalton Well Number: 24Q-241  
 8. Location: QtrQtr: SESW Section: 24 Township: 7N Range: 66W Meridian: 6  
 Footage at surface: Distance: 250 feet Direction: FSL Distance: 2600 feet Direction: FWL  
 As Drilled Latitude: 40.554310 As Drilled Longitude: -104.725830

### GPS Data:

Data of Measurement: 08/13/2013 PDOP Reading: 1.8 GPS Instrument Operator's Name: Holly L .Tracy

\*\* If directional footage at Top of Prod. Zone Dist.: 1274 feet. Direction: FSL Dist.: 2303 feet. Direction: FWL

Sec: 24 Twp: 7N Rng: 66W

\*\* If directional footage at Bottom Hole Dist.: 499 feet. Direction: FNL Dist.: 2313 feet. Direction: FWL

Sec: 24 Twp: 7N Rng: 66W

9. Field Name: EATON 10. Field Number: 19350

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

12. Spud Date: (when the 1st bit hit the dirt) 04/09/2013 13. Date TD: 04/19/2013 14. Date Casing Set or D&A: 04/09/2013

### 15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 11637 TVD\*\* 7193 17 Plug Back Total Depth MD 11637 TVD\*\* 7193

18. Elevations GR 4865 KB 4875

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

### 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	13+3/4	9+5/8	36	0	944	840	0	957	CBL
1ST	8+3/4	7	26	0	7,668	671	0	7,668	CBL
1ST LINER	7	4+1/2	13.5	7538	11,733				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	
			<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: Christine Brookshire

Title: Regulatory Tech Date: \_\_\_\_\_ Email: christine.brookshire@pdce.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400491611	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400491225	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"/>
400491613	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<b>Other Attachments</b>			
400491196	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)