

Document Number:
400590843

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: 8960 4. Contact Name: Brandon Dykes
 2. Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY Phone: (720) 440-6111
 3. Address: 410 17TH STREET SUITE #1400 Fax: (720) 279-2331
 City: DENVER State: CO Zip: 80202

5. API Number 05-123-38633-00 6. County: WELD
 7. Well Name: Pronghorn Well Number: 11-41-28HNB
 8. Location: QtrQtr: SWNW Section: 28 Township: 5N Range: 61W Meridian: 6
 Footage at surface: Distance: 1411 feet Direction: FNL Distance: 369 feet Direction: FWL
 As Drilled Latitude: 40.375280 As Drilled Longitude: -104.222300

GPS Data:
 Date of Measurement: 04/04/2014 PDOP Reading: 2.3 GPS Instrument Operator's Name: Wyatt Hall

** If directional footage at Top of Prod. Zone Dist.: 709 feet. Direction: FNL Dist.: 641 feet. Direction: FWL
 Sec: 28 Twp: 5N Rng: 61W
 ** If directional footage at Bottom Hole Dist.: 1288 feet. Direction: FNL Dist.: 480 feet. Direction: FEL
 Sec: 28 Twp: 5N Rng: 61W

9. Field Name: RIVERSIDE 10. Field Number: 73800
 11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 01/14/2014 13. Date TD: 01/21/2014 14. Date Casing Set or D&A: 01/22/2014

15. Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 10742 TVD** 6069 17 Plug Back Total Depth MD 10742 TVD** 6069

18. Elevations GR 4616 KB 4633
 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:
MUD,CBL, Open Hole

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+1/2	9+5/8	36	0	754	420	0	754	CALC
1ST	8+3/4	7	26	0	6,456	752	0	6,456	CBL
1ST LINER	6+1/8	4+1/2	11.6	5943	10,742				

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	5,977		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,182		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Company geologist could not locate Sussex formation. Open Hole Logs for this pad were run on the Pronghorn 11-41-28HNB.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: Brandon Dykes

Title: Drilling Engineering Tech

Date: _____

Email: bdykes@bonanzacr.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400590951	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400608284	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			
400590923	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400590924	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400590932	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400590935	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400608276	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400608289	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)