

**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:  
400394304

Date Received:  
05/08/2013

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

5. API Number 05-123-36767-00 6. County: WELD  
 7. Well Name: Wetco Farms Well Number: F-J-4HC  
 8. Location: QtrQtr: NWNW Section: 4 Township: 4N Range: 63W Meridian: 6  
 Footage at surface: Distance: 253 feet Direction: FNL Distance: 170 feet Direction: FWL  
 As Drilled Latitude: 40.348000 As Drilled Longitude: -104.451680

GPS Data:

Date of Measurement: 03/21/2013 PDOP Reading: 1.1 GPS Instrument Operator's Name: Jeff Guill

\*\* If directional footage at Top of Prod. Zone Dist.: 659 feet. Direction: FNL Dist.: 1597 feet. Direction: FWL

Sec: 4 Twp: 4N Rng: 63W

\*\* If directional footage at Bottom Hole Dist.: 474 feet. Direction: FSL Dist.: 1614 feet. Direction: FWL

Sec: 4 Twp: 4N Rng: 63W

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) 03/03/2013 13. Date TD: 03/15/2013 14. Date Casing Set or D&A: 03/16/2013

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 11484 TVD\*\* 6517 17 Plug Back Total Depth MD 11484 TVD\*\* 6517

18. Elevations GR 4569 KB 4581

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, MUD

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	699	590	0	699	VISU
1ST	8+3/4	7	26	0	7,105	765	150	7,105	CBL
1ST LINER	6+1/8	4+1/2	11.6	6951	11,477				

**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	
NIOBRARA	6,480		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	6,841		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	6,898		<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: Olga Chikaloff

Title: Engineering Technician Date: 5/8/2013 Email: ochikaloff@bonanzack.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400394328	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400398822	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"/>
<b>Other Attachments</b>			
400394304	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400394315	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400398821	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400398829	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

User Group	Comment	Comment Date
Permit	Per operator corrected SHL. The values originally submitted were from another well.	7/31/2014 12:52:17 PM
Permit	ON HOLD: Requested confirmation for SHL changes.	7/25/2014 2:32:12 PM

Total: 2 comment(s)