

FORM
5Rev
09/14

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:

400705611

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

OGCC Operator Number: 10459

Contact Name: Kaleb Roush

Name of Operator: EXTRACTION OIL & GAS LLC

Phone: (720) 557-8322

Address: 1888 SHERMAN ST #200

Fax:

City: DENVER

State: CO

Zip: 80203

API Number 05-123-38920-01

County: WELD

Well Name: Rubyanna

Well Number: 13NB-29W

Location: QtrQtr: SESE Section: 13 Township: 6N Range: 67W Meridian: 6

Footage at surface: Distance: 779 feet Direction: FSL Distance: 225 feet Direction: FEL

As Drilled Latitude: 40.481951 As Drilled Longitude: -104.833209

GPS Data:

Date of Measurement: 09/09/2014 PDOP Reading: 3.5 GPS Instrument Operator's Name: Owen McKee

** If directional footage at Top of Prod. Zone Dist.: 1141 feet. Direction: FSL Dist.: 1018 feet. Direction: FEL

Sec: 13 Twp: 6N Rng: 67W

** If directional footage at Bottom Hole Dist.: 1121 feet. Direction: FSL Dist.: 566 feet. Direction: FWL

Sec: 12 Twp: 6N Rng: 67W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 04/17/2014 Date TD: 04/28/2014 Date Casing Set or D&A: 04/29/2014

Rig Release Date: 05/24/2014 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 11645 TVD** 7007 Plug Back Total Depth MD 7037 TVD** 7420

Elevations GR 4872 KB 24

Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	24	16		0	80	100	0	80	VISU
SURF	12+1/4	9+5/8	36	0	750	215	0	750	VISU
1ST	8+3/4	7	26	0	7,400	900	0	7,400	CBL
1ST LINER	6+1/8	4+1/2	13.5	6401	11,641				

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:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
NIOBRARA	6,963	11,645	NO	NO	

Comment:

This is a sidetracked well from API# 05-123-38920-00. All sidetracked data is included here as is the data for the OWB (except the directional data for the vertical section that can be found on its form 5).

The Open Hole Log was run on Rubyanna 13C-30W and is attached to its Form 5.

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

Signed: _____

Print Name: Dustin Dyk

Title: Drilling Manager Date: _____ Email: ddyk@extractionog.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400705683	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 checked="" type="checkbox"/> No <input type="checkbox"/>
400705690	Other	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<u>Other Attachments</u>		
400705647	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400705655	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400705659	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400705661	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400705663	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400705664	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400705668	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400705669	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400705681	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400705877	DIRECTIONAL DATA	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)