

**FORM  
5**Rev  
09/14**State of Colorado****Oil and Gas Conservation Commission**

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Document Number:

400697705

Date Received:

10/08/2014

**DRILLING COMPLETION REPORT**

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 10399

Contact Name: Joyce Henkin

Name of Operator: NIGHTHAWK PRODUCTION LLC

Phone: (303) 407-9609

Address: 1805 SHEA CENTER DR #290

Fax: (303) 407-8790

City: HIGHLANDS State: CO Zip: 80129

API Number 05-121-11045-00

County: WASHINGTON

Well Name: SALEN

Well Number: 14-35

Location: QtrQtr: SESW Section: 35 Township: 5S Range: 54W Meridian: 6

Footage at surface: Distance: 792 feet Direction: FSL Distance: 2245 feet Direction: FWL

As Drilled Latitude: 39.568290 As Drilled Longitude: -103.398350

## GPS Data:

Date of Measurement: 09/24/2014 PDOP Reading: 2.9 GPS Instrument Operator's Name: Elijah Frane

\*\* If directional footage at Top of Prod. Zone Dist.: 611 feet Direction: FSL Dist.: 2021 feet Direction: FWL

Sec: 35 Twp: 5S Rng: 54W

\*\* If directional footage at Bottom Hole Dist.: 611 feet Direction: FSL Dist.: 2021 feet Direction: FWL

Sec: 35 Twp: 5S Rng: 54W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 09/08/2014 Date TD: 09/24/2014 Date Casing Set or D&amp;A: 09/29/2014

Rig Release Date: 09/28/2014 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 8310 TVD\*\* 8299 Plug Back Total Depth MD 8213 TVD\*\* 0

Elevations GR 5160 KB 5175 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

## List Electric Logs Run:

Triple Combo, CBL

**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
SURF	12+1/4	8+5/8	24	0	360	175	0	360	VISU
1ST	7+7/8	5+1/2	17	0	8,304	1,219	0	8,304	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:

### **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	
WOLFCAMP	6,181				
LANSING-KANSAS CITY	6,875				
MARMATON	7,160				
CHEROKEE	7,377				
ATOKA	7,686				
MORROW	7,853				
MISSISSIPPIAN	7,996				
SPERGEN	8,032				

Operator Comments

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

Signed: \_\_\_\_\_

Print Name: Joyce Henkin

Title: Production Tech Date: 10/8/2014 Email: joycehenkin@nighthawkenenergy.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2519434	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
2519440	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"/>
<u>Other Attachments</u>					
400697705	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400698700	TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400698703	TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400698711	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400698720	OPERATIONS SUMMARY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400702137	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400702153	CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400702162	WELL LOCATION PLAT	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Attached cross-sectional and plan view.	11/4/2014 9:39:56 AM
Permit	Need a correct cross-sectional view of the wellbore that should have been provided with the directional survey. Should show cross section from surface to TD. Maybe exaggerated to show S curve.	11/3/2014 11:23:13 AM
Permit	Operator could not find surface casing cement tcket. Sent Daily Summary which included the data.	11/3/2014 10:57:52 AM
Permit	Missing surface casing cement ticket.	10/10/2014 8:45:48 AM
Permit	Missing complete cross-sectional view of the directional survey.	10/10/2014 8:29:31 AM
Permit	Bottom hole footage setbacks are incorrect. Top of production setbacks are incorrect. Revised.	10/10/2014 8:28:27 AM

Total: 6 comment(s)