

FORM
5

Rev
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



Document Number:

400413430

Date Received:

10/20/2013

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: 10261 Contact Name: JONATHAN RUNGE
Name of Operator: BAYSWATER EXPLORATION AND PRODUCTION Phone: (303) 216-0703
Address: 730 17TH ST STE 610 Fax: (303) 216-2139
City: DENVER State: CO Zip: 80202

API Number 05-123-37056-00 County: WELD
Well Name: Thornton Well Number: 13-22
Location: QtrQtr: SWSW Section: 22 Township: 7N Range: 66W Meridian: 6
Footage at surface: Distance: 226 feet Direction: FSL Distance: 407 feet Direction: FWL
As Drilled Latitude: 40.553855 As Drilled Longitude: -104.771920

GPS Data:
Date of Measurement: 10/03/2013 PDOP Reading: 1.7 GPS Instrument Operator's Name: Alan Hnizdo

** If directional footage at Top of Prod. Zone Dist.: 615 feet Direction: FSL Dist.: 683 feet Direction: FWL
Sec: 22 Twp: 7N Rng: 66W
** If directional footage at Bottom Hole Dist.: 603 feet Direction: FSL Dist.: 707 feet Direction: FWL
Sec: 22 Twp: 7N Rng: 66W

Field Name: WATTENBERG Field Number: 90750
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 04/08/2013 Date TD: 04/12/2013 Date Casing Set or D&A: 04/13/2013
Rig Release Date: Per Rule 308A.b.

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

Total Depth MD 7613 TVD** 7572 Plug Back Total Depth MD 7609 TVD** 7572
Elevations GR 4934 KB 4950 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
DENSITY, NEUTRON, INDUCTION, 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	886	234	0	886	VISU
1ST	7+7/8	4+1/2	11.6	0	7,609	890	1,484	7,609	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	
PARKMAN	3,958		NO	NO	
SUSSEX	4,650		NO	NO	
SHANNON	5,202		NO	NO	
NIOBRARA	7,218		NO	NO	
FORT HAYS	7,472		NO	NO	
CODELL	7,505		NO	NO	
GREENHORN	7,616		NO	NO	

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: JONATHAN RUNGE

Title: CONSULTANT Date: 10/20/2013 Email: jrunge@iptengineers.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400491562	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400413447	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			
400413430	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400413442	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400413444	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400413448	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	Drilling and casing information appears to be off well bore diagram & WBD transposed TVD & MD & didn't match Directional data and Directional Survey or cement tickets. Reentered casing depths, sx of cement, tVD, MD off logs and 3rd party service provider documents.	11/26/2014 10:13:36 AM
Permit	Entered Greenhorn top. PDF of triple combination submitted on sundry 400537523.	1/9/2014 8:19:04 AM
Permit	Missing Greenhorn top. Requested a PDF of triple combination.	1/7/2014 3:56:47 PM

Total: 3 comment(s)