

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.

Document Number:
400687562

Date Received:
12/22/2014

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 05-123-39183-00 County: WELD

Well Name: DIAMOND VALLEY EAST Well Number: 8

Location: QtrQtr: SWSW Section: 23 Township: 6N Range: 67W Meridian: 6

Footage at surface: Distance: 928 feet Direction: FSL Distance: 155 feet Direction: FWL

As Drilled Latitude: 40.467750 As Drilled Longitude: -104.869800

GPS Data:
Date of Measurement: 01/17/2015 PDOP Reading: 2.8 GPS Instrument Operator's Name: ADAM KELLY

** If directional footage at Top of Prod. Zone Dist.: 1506 feet. Direction: FSL Dist.: 496 feet. Direction: FEL
Sec: 22 Twp: 6N Rng: 67W

** If directional footage at Bottom Hole Dist.: 1521 feet. Direction: FSL Dist.: 539 feet. Direction: FWL
Sec: 21 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) 08/19/2014 Date TD: 09/09/2014 Date Casing Set or D&A: 09/11/2014

Rig Release Date: 12/03/2014 Per Rule 308A.b.

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

Total Depth MD 16770 TVD** 6970 Plug Back Total Depth MD 16770 TVD** 6970

Elevations GR 4769 KB 4793 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, Mudlog, GR

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	805	320	0	805	VISU
1ST	8+3/4	7	26	0	7,406	730	0	7,406	CBL
1ST LINER	6+1/8	4+1/2	13.5	7294	16,766				CALC

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	7,018		NO	NO	

Comment:

The Open Hole Log was run on DVE 12 API#05-123-40318 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: Kaleb Roush

Title: Drilling Technician Date: 12/22/2014 Email: kroush@extractionog.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400711862	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400777019	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			
400687562	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711847	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711848	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711850	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711851	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711853	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711859	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400733504	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777010	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777015	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777017	LAS-MUD	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)