

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:
400739023

Date Received:
01/15/2015

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 05-123-39054-00 County: WELD
 Well Name: Windsor LV Well Number: G-14H
 Location: QtrQtr: NENE Section: 14 Township: 6N Range: 67W Meridian: 6
 Footage at surface: Distance: 1405 feet Direction: FNL Distance: 265 feet Direction: FEL
 As Drilled Latitude: 40.490461 As Drilled Longitude: -104.852252

GPS Data:
 Date of Measurement: 01/16/2014 PDOP Reading: 1.6 GPS Instrument Operator's Name: Ben Hardenbergh

** If directional footage at Top of Prod. Zone Dist.: 2595 feet. Direction: FNL Dist.: 495 feet. Direction: FEL
 Sec: 14 Twp: 6N Rng: 67W
 ** If directional footage at Bottom Hole Dist.: 2646 feet. Direction: FNL Dist.: 507 feet. Direction: FWL
 Sec: 14 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) 11/07/2014 Date TD: 11/14/2014 Date Casing Set or D&A: 11/15/2014
 Rig Release Date: 12/31/2014 Per Rule 308A.b.

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

Total Depth MD 11688 TVD** 7056 Plug Back Total Depth MD 11688 TVD** 7056
 Elevations GR 4848 KB 4872 **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	13+1/2	9+5/8	36	0	750	398	0	750	VISU
1ST	8+3/4	7	26	0	7,437	908	0	7,437	CBL
1ST LINER	6+1/8	4+1/2	13.5	6730	11,688				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	7,269		NO	NO	MD Top is Nio B

Comment:

The Open Hole Log was run on Windsor LV F-14H (API# 05-123-38175) 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: 1/15/2015 Email: kroush@extractionog.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400739112	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400778081	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			
400739023	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400764114	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766854	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766859	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766924	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766925	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766926	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766927	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766928	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766930	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766932	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766933	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766936	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400766937	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400770610	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)