

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



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Document Number:

400772368

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 05-123-40328-00

County: WELD

Well Name: GP-Dairy

Well Number: 1-20-19

Location: QtrQtr: NENE Section: 20 Township: 5N Range: 65W Meridian: 6

Footage at surface: Distance: 658 feet Direction: FNL Distance: 1305 feet Direction: FEL

As Drilled Latitude: 40.390060 As Drilled Longitude: -104.682500

GPS Data:

Date of Measurement: 02/09/2015 PDOP Reading: 1.5 GPS Instrument Operator's Name: Chase Miller

** If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

** If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 01/18/2015 Date TD: 01/21/2015 Date Casing Set or D&A: 01/24/2015

Rig Release Date: 02/04/2015 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 8205 TVD** 6896 Plug Back Total Depth MD 7050 TVD** 6350

Elevations GR 4673 KB 4697

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

List Electric Logs Run:

N/A

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	42	0	80	100	0	80	VISU
SURF	13+1/2	9+5/8	36	0	1,029	445	0	1,029	VISU

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	OPEN HOLE		268	7,050	7,216

Details of work:

This plug was required because we could not get through the curve with the reamer assembly and therefore sidetracked the well following this plug.

17.5# Halliburton cement 0.94 yield

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	

Comment:

We were having issues getting back through our curve with a reamer assembly. We hit the Sharron springs shale at too high of an inclination and exposed too much of the formation. We have fought it for 3 days and did not have any success. The last attempt to get through almost ended with us getting stuck. Therefore, we plugged and sidetracked this well at 7050' MD.

This wellbore did not have any logs run on it and will not produce. 05-123-40328-01 will be the producing well and has all pertinent and required logs attached to its Final Form 5. Since there is no productive zone, we can only submit a preliminary form 5 for the OWB.

The total depth reached was 7216': 1952' FSL 1963' FWL in section 20.

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: _____ Email: kroush@extractionog.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400788844	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 type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400788846	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400790118	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)