

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:

400758109

Date Received:

03/09/2015

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 05-073-06637-00 County: LINCOLN
Well Name: SNOW KING Well Number: 9-32
Location: QtrQtr: NESE Section: 32 Township: 6S Range: 54W Meridian: 6
Footage at surface: Distance: 2540 feet Direction: FSL Distance: 660 feet Direction: FEL
As Drilled Latitude: 39.483560 As Drilled Longitude: -103.456080

GPS Data:
Date of Measurement: 01/19/2015 PDOP Reading: 2.7 GPS Instrument Operator's Name: Elijah Frane

** 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: WILDCAT Field Number: 99999
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 12/16/2014 Date TD: 01/08/2015 Date Casing Set or D&A: 01/10/2015
Rig Release Date: 01/10/2015 Per Rule 308A.b.

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

Total Depth MD 8510 TVD** Plug Back Total Depth MD 8388 TVD**
Elevations GR 5323 KB 5325 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
Triple Combo

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	378	175	0	378	VISU
1ST	7+7/8	5+1/2	17	0	8,481	1,191	1,376	8,481	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	6,376				
LANSING-KANSAS CITY	7,053				
MARMATON	7,314				
CHEROKEE	7,538				
ATOKA	7,753				
MISSISSIPPIAN-SPERGEN	8,274				

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: 3/9/2015

Email: joycehenkin@nighthawkenegy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400766466	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 checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Other Attachments			
2519725	GYRO SURVEY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400758109	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400778163	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400778167	PDF-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400778177	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400778180	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400793722	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>
Engineering Tech	First string setting depth and PBTD adjusted as per production casing cementing report.	4/10/2015 12:30:04 PM
Permit	Gyro datya attached.	3/10/2015 9:17:34 AM

Total: 2 comment(s)