

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



DE ET OE ES

Document Number:

400804349

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 05-123-41030-00

County: WELD

Well Name: DT-Martinez

Well Number: 3-5-6

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

Footage at surface: Distance: 462 feet Direction: FNL Distance: 1684 feet Direction: FEL

As Drilled Latitude: 40.435224 As Drilled Longitude: -104.683733

GPS Data:

Date of Measurement: 06/18/2015 PDOP Reading: 2.4 GPS Instrument Operator's Name: Alan Hnizdo

** If directional footage at Top of Prod. Zone Dist.: 3059 feet. Direction: FNL Dist.: 3225 feet. Direction: FEL

Sec: 5 Twp: 5N Rng: 65W

** If directional footage at Bottom Hole Dist.: 2983 feet. Direction: FNL Dist.: 495 feet. Direction: FWL

Sec: 6 Twp: 5N Rng: 65W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 02/20/2015 Date TD: 03/07/2015 Date Casing Set or D&A: 03/10/2015

Rig Release Date: 06/13/2015 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 14887 TVD** 6934 Plug Back Total Depth MD 14887 TVD** 6934

Elevations GR 4640 KB 4660

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

List Electric Logs Run:

CBL, GR, Mudlog

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 | 26 | 16+1/4 | 42 | 0 | 80 | 100 | 0 | 80 | VISU |
| SURF | 13+1/2 | 9+5/8 | 36 | 0 | 1,108 | 662 | 0 | 1,108 | VISU |
| 1ST | 8+3/4 | 7 | 26 | 0 | 7,954 | 1,019 | 0 | 7,954 | CBL |
| 1ST LINER | 6+1/4 | 4+1/2 | 13.5 | 6992 | 14,883 | | | | 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 | 7,574 | | NO | NO | |

Comment:

The Open Hole Log was run on API# 05-123-41031 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: Engineering Technician

Date: _____

Email: kroush@extractionog.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|-----------------------|---|--|
| <u>Attachment Checklist</u> | | | |
| 400804353 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 400810510 | 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"/> |
| <u>Other Attachments</u> | | | |
| 400810270 | WELLBORE DIAGRAM | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400810511 | DIRECTIONAL DATA | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400833609 | LAS-GAMMA RAY | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400833610 | PDF-GAMMA RAY | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400859081 | PDF-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400859082 | LAS-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400859083 | LAS-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400859084 | PDF-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400859085 | LAS-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400859086 | PDF-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400860369 | LAS-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400860371 | PDF-CEMENT BOND | 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)