

**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



DE ET OE ES

Document Number:

400928662

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 &amp; GAS LLC

Phone: (720) 557-8322

Address: 370 17TH STREET SUITE 5300

Fax:

City: DENVER State: CO Zip: 80202

API Number 05-123-42283-00

County: WELD

Well Name: Silverback

Well Number: 1

Location: QtrQtr: NENW Section: 36 Township: 12N Range: 62W Meridian: 6

Footage at surface: Distance: 300 feet Direction: FNL Distance: 1407 feet Direction: FWL

As Drilled Latitude: 40.972552 As Drilled Longitude: -104.272217

## GPS Data:

Date of Measurement: 11/19/2015 PDOP Reading: 1.8 GPS Instrument Operator's Name: Todd Bakeberg

\*\* If directional footage at Top of Prod. Zone Dist.: 349 feet. Direction: FNL Dist.: 780 feet. Direction: FWL

Sec: 36 Twp: 12N Rng: 62W

\*\* If directional footage at Bottom Hole Dist.: 357 feet. Direction: FSL Dist.: 692 feet. Direction: FWL

Sec: 1 Twp: 11N Rng: 62W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number: 8754.5

Spud Date: (when the 1st bit hit the dirt) 11/03/2015 Date TD: 11/09/2015 Date Casing Set or D&amp;A: 11/10/2015

Rig Release Date: 11/11/2015 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 17510 TVD\*\* 7319 Plug Back Total Depth MD 17510 TVD\*\* 7319

Elevations GR 5283 KB 5303 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

Mudlog, GR, OHL, CBL

**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	1,548	884	0	1,548	VISU
1ST	7+7/8	5+1/2	20	0	17,510	3,251	1,130	17,510	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	
PARKMAN	4,225		NO	NO	
SUSSEX	5,045		NO	NO	
SHANNON	5,760		NO	NO	
SHARON SPRINGS	7,096		NO	NO	
NIOBRARA	7,168		NO	NO	
FORT HAYS	7,708		NO	NO	
CODELL	7,924		NO	NO	

Comment:

The Open Hole Log was run on this well for the entire Silverback Pad and is attached here.

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>		
400933238	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400934523	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>		
400934525	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400935453	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400955158	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400955160	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400955162	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400955163	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400955665	PDF-COMBINATION OPEN HOLE	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400955668	LAS-COMBINATION OPEN HOLE	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)