

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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| DE | ET | OE | ES |
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Document Number:

400941969

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: 10261

Contact Name: Paul Gottlob

Name of Operator: BAYSWATER EXPLORATION AND PRODUCTION

Phone: (720) 420-5747

Address: 730 17TH ST STE 610

Fax:

City: DENVER State: CO Zip: 80202

API Number 05-123-41709-00

County: WELD

Well Name: Carlson

Well Number: J-15-16HN

Location: QtrQtr: NENE Section: 15 Township: 5N Range: 65W Meridian: 6

Footage at surface: Distance: 1054 feet Direction: FNL Distance: 369 feet Direction: FEL

As Drilled Latitude: 40.403698 As Drilled Longitude: -104.641292

GPS Data:

Date of Measurement: 12/01/2015 PDOP Reading: 2.3 GPS Instrument Operator's Name: Ben Milius

** If directional footage at Top of Prod. Zone Dist.: 2261 feet. Direction: FNL Dist.: 773 feet. Direction: FEL
Sec: 15 Twp: 5N Rng: 65W

** If directional footage at Bottom Hole Dist.: 2310 feet. Direction: FNL Dist.: 2335 feet. Direction: FWL
Sec: 16 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) 10/07/2015 Date TD: 11/14/2015 Date Casing Set or D&A: 11/16/2015

Rig Release Date: 11/24/2015 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 14898 TVD** 6930 Plug Back Total Depth MD 14869 TVD** 6930

Elevations GR 4621 KB 4644 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

MWD, Mud, CBL, O.H. Logging Exception for API#05-123-41720

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 | 43 | 0 | 80 | 400 | 0 | 80 | VISU |
| SURF | 12+1/4 | 9+5/8 | 36 | 0 | 848 | 275 | 0 | 848 | VISU |
| 1ST | 8+3/4 | 7 | 29 | 0 | 7,430 | 725 | 36 | 7,430 | CBL |
| 2ND | 6+1/8 | 4+1/2 | 11.6 | 0 | 14,882 | 665 | 6,200 | 14,882 | 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 | 3,705 | | NO | NO | |
| SUSSEX | 4,207 | 4,227 | NO | NO | |
| SHARON SPRINGS | 6,782 | | NO | NO | |
| NIOBRARA | 7,225 | | NO | NO | |

Comment:

The Interpolated TPZ is the planned upper Perforation @ 7440' (which is 10' below the 7" shoe). The actual Perforation depths will be submitted on the Form 5A. The TPZ and BHL distances were calculated using the Width at center f/ North to South of Sections 15 & 16.
O.H. Logging Exception for API#05-123-41720, Form 4 Doc #400867096 approved 7/14/2015.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: Paul Gottlob

Title: Regulatory & Engin. Tech.

Date: _____

Email: paul.gottlob@iptenergyservices.com

Attachment Check List

| Att Doc Num | Document Name | attached ? |
|-----------------------------|--|---|
| <u>Attachment Checklist</u> | | |
| 400943212 | CMT Summary * | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 400943211 | 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> | | |
| 400943210 | DIRECTIONAL DATA | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 400943227 | PDF-MUD | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 400946565 | LAS-MUD | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 400946568 | LAS-CEMENT BOND | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 400946571 | PDF-CEMENT BOND | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 400952142 | PDF-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 400952143 | LAS-MEASUREMENT/LOGGING WHILE DRILLING | 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)