

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:

401125182

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: Kamrin Ruder

Name of Operator: EXTRACTION OIL &amp; GAS LLC

Phone: (720) 9747743

Address: 370 17TH STREET SUITE 5300

Fax:

City: DENVER State: CO Zip: 80202

API Number 05-123-39581-00

County: WELD

Well Name: Winder

Well Number: 11

Location: QtrQtr: NENE Section: 9 Township: 6N Range: 67W Meridian: 6

Footage at surface: Distance: 936 feet Direction: FNL Distance: 684 feet Direction: FEL

As Drilled Latitude: 40.506438 As Drilled Longitude: -104.891290

## GPS Data:

Date of Measurement: 09/27/2016 PDOP Reading: 1.2 GPS Instrument Operator's Name: Ross Todd

\*\* If directional footage at Top of Prod. Zone Dist.: 2142 feet. Direction: FNL Dist.: 463 feet. Direction: FEL

Sec: 9 Twp: 6N Rng: 67W

\*\* If directional footage at Bottom Hole Dist.: 1935 feet. Direction: FNL Dist.: 525 feet. Direction: FWL

Sec: 8 Twp: 6N Rng: 67W

Field Name: SEVERANCE

Field Number: 77030

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/03/2016 Date TD: 09/17/2016 Date Casing Set or D&amp;A: 09/18/2016

Rig Release Date: 09/18/2016 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 17100 TVD\*\* 6927 Plug Back Total Depth MD 17092 TVD\*\* 6927

Elevations GR 4865 KB 4890

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

## List Electric Logs Run:

GR, MUD, 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	1,541	550	0	1,541	VISU
1ST	7+7/8	5+1/2	20	0	17,090	2,275	75	17,090	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	
PARKMAN	3,662		NO	NO	
SUSSEX	4,515		NO	NO	
SHANNON	4,907		NO	NO	
SHARON SPRINGS	7,383		NO	NO	
NIOBRARA	7,462				

Comment:

The Combination OHL was run on Winder 3 (05-123-39574-00) and is attached to its form 5.

The TPZ footages are estimates as the completions on this well will be delayed due to economic and logistical reasons.

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

Signed: \_\_\_\_\_

Print Name: Kamrin Ruder

Title: Drilling Technician Date: \_\_\_\_\_ Email: kruder@extractionog.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
401130132	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401138652	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>			
401125753	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401138655	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401150738	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401150742	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401150752	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)