

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.

Document Number:
401318801

Date Received:

Completion Type Final completion Preliminary completion

OGCC Operator Number: 10447 Contact Name: CARI MASCIOLI
 Name of Operator: URSA OPERATING COMPANY LLC Phone: (970) 284-3244
 Address: 1600 BROADWAY ST STE 2600 Fax: _____
 City: DENVER State: CO Zip: 80202

API Number 05-045-23317-00 County: GARFIELD
 Well Name: BMC D Well Number: 21D-18-07-95
 Location: QtrQtr: NENW Section: 18 Township: 7S Range: 95W Meridian: 6
 Footage at surface: Distance: 1218 feet Direction: FNL Distance: 2380 feet Direction: FWL
 As Drilled Latitude: 39.441629 As Drilled Longitude: -108.040507

GPS Data:
 Date of Measurement: 05/30/2017 PDOP Reading: 2.2 GPS Instrument Operator's Name: HOFFMANN

** If directional footage at Top of Prod. Zone Dist.: 1275 feet. Direction: FNL Dist.: 1906 feet. Direction: FWL
 Sec: 18 Twp: 7S Rng: 95W
 ** If directional footage at Bottom Hole Dist.: 1275 feet. Direction: FNL Dist.: 1906 feet. Direction: FWL
 Sec: 18 Twp: 7S Rng: 95W

Field Name: WILDCAT Field Number: 99999
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 04/30/2017 Date TD: 05/06/2017 Date Casing Set or D&A: 05/07/2017
 Rig Release Date: 05/24/2017 Per Rule 308A.b.

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

Total Depth MD 6315 TVD** 6278 Plug Back Total Depth MD 6257 TVD** 6220
 Elevations GR 5268 KB 5285 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL/MUD/PULSED NEUTRON/TRIPLE COMBO ON 045-23314

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	16	16	75	0	77	70	0	77	VISU
SURF	12+1/4	8+5/8	32	0	1,715	408	0	1,741	VISU
1ST	7+7/8	4+1/2	11.6	0	6,301	676	1,780	6,315	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	
OHIO CREEK	3,182		NO	NO	
WILLIAMS FORK	3,182		NO	NO	
CAMEO	5,782		NO	NO	
ROLLINS	6,149		NO	NO	

Comment:

Please note, completion operations will be delayed on this well. Currently, Ursa plans to complete all 28 wells on the BMC D pad once all wells are drilled to TD (14 have been drilled to TD to date, 2nd occupation is currently scheduled to commence in mid-October, 2017, followed by an anticipated completion start date of early February, 2018).

Logs have been run on this well are are provided with this Form 5 submittal. Ursa currently has a variance request in review with COGCC staff regarding the waiver of interim reclamation due to extensive landscaping that has been installed at the pad location. Top of production zone footages are estimated as this well has not yet been completed. Actual TPZ footages will be provided at the time of the form 5A submittal.

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

Signed: _____

Print Name: CARI MASCIOLO

Title: REGULATORY TECH

Date: _____

Email: CMASCIOLO@URSARESOURCES.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401335203	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401351113	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"/>
Other Attachments			
401335204	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401335205	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401335208	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401335209	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401351110	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401351112	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401351114	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401351115	DIRECTIONAL DATA	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)