

**DRILLING COMPLETION REPORT**

Document Number:  
401404697

Date Received:

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: 10629 Contact Name: Sydney Smith  
 Name of Operator: FIFTH CREEK ENERGY OPERATING COMPANY Phone: (303) 910-4511  
 Address: 5251 DTC PKWY STE 420 Fax: \_\_\_\_\_  
 City: GREENWOOD State: CO Zip: 80111

API Number 05-123-44711-00 County: WELD  
 Well Name: Critter Creek Well Number: 278-1527H  
 Location: QtrQtr: SWSE Section: 15 Township: 11N Range: 63W Meridian: 6  
 Footage at surface: Distance: 279 feet Direction: FSL Distance: 1690 feet Direction: FEL  
 As Drilled Latitude: 40.915953 As Drilled Longitude: -104.415619

GPS Data:  
 Date of Measurement: 08/31/2017 PDOP Reading: 1.4 GPS Instrument Operator's Name: DALLAS NIELSEN

\*\* If directional footage at Top of Prod. Zone Dist.: 324 feet. Direction: FNL Dist.: 1610 feet. Direction: FEL  
 Sec: 22 Twp: 11N Rng: 63W  
 \*\* If directional footage at Bottom Hole Dist.: 300 feet. Direction: FSL Dist.: 1663 feet. Direction: FEL  
 Sec: 27 Twp: 11N Rng: 63W

Field Name: DJ HORIZONTAL NIOBRARA Field Number: 16950  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 05/17/2017 Date TD: 07/13/2017 Date Casing Set or D&A: 07/15/2017  
 Rig Release Date: 07/16/2017 Per Rule 308A.b.

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

Total Depth MD 17844 TVD\*\* 7239 Plug Back Total Depth MD 17789 TVD\*\* 7239

Elevations GR 5227 KB 16 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
MWD, 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	20	16	42	0	60	50	0	60	VISU
SURF	13+1/2	9+5/8	36	0	1,524	592	0	1,524	VISU
1ST	8+3/4	5+1/2	17	0	17,834	2,585	0	17,834	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	
PIERRE A	3,212		NO	NO	
PARKMAN	4,018		NO	NO	
SHARON SPRINGS	7,061				
NIOBRARA	7,267				

Comment:

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

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

Print Name: Sydney Smith

Title: Regulatory Analyst

Date: \_\_\_\_\_

Email: ssmith@fifthcreekenergy.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
401405169	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401404746	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"/>
<b>Other Attachments</b>			
401404720	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401404725	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401404727	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401404730	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401404731	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401404732	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401404744	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401405163	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401405167	LAS-CEMENT BOND	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)