

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:

401470750

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 GOTTLÖB

Name of Operator: BAYSWATER EXPLORATION &amp; PRODUCTION LLC

Phone: (720) 420-5747

Address: 730 17TH ST STE 500

Fax:

City: DENVER State: CO Zip: 80202

API Number 05-123-43651-00

County: WELD

Well Name: Ward

Well Number: V-20-19HN

Location: QtrQtr: SESE Section: 20 Township: 6N Range: 66W Meridian: 6

Footage at surface: Distance: 289 feet Direction: FSL Distance: 213 feet Direction: FEL

As Drilled Latitude: 40.467195 As Drilled Longitude: -104.793155

## GPS Data:

Date of Measurement: 11/30/2017 PDOP Reading: 1.5 GPS Instrument Operator's Name: CHARLES SCOTT

\*\* If directional footage at Top of Prod. Zone Dist.: 487 feet. Direction: FSL Dist.: 470 feet. Direction: FEL

Sec: 20 Twp: 6N Rng: 66W

\*\* If directional footage at Bottom Hole Dist.: 457 feet. Direction: FSL Dist.: 472 feet. Direction: FWL

Sec: 19 Twp: 6N Rng: 66W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 06/26/2017 Date TD: 09/09/2017 Date Casing Set or D&amp;A: 09/11/2017

Rig Release Date: 11/23/2017 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 17716 TVD\*\* 6985 Plug Back Total Depth MD 17651 TVD\*\* 6985

Elevations GR 4727 KB 4745 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

MWD, Mud, CBL, Dual Induction

## 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           | 20             | 43    | 0             | 80            | 400       | 0       | 80      | VISU   |
| SURF        | 13+1/2       | 9+5/8          | 36    | 0             | 1,548         | 466       | 0       | 1,548   | VISU   |
| 1ST         | 8+1/2        | 5+1/2          | 20    | 0             | 17,701        | 2,790     | 1,170   | 17,701  | 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        | 3,608          |        | NO               | NO    |   |
| SUSSEX         | 4,030          |        | NO               | NO    |   |
| SHANNON        | 4,344          |        | NO               | NO    |   |
| SHARON SPRINGS | 6,866          |        | NO               | NO    |   |
| NIOBRARA       | 6,913          |        | NO               | NO    |   |

Comment:

The stated footages for the TPZ are at MD 7469', TVD 6957', if changed upon completion this will be updated on the Form 5A.

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> |                       |   |
| 401478032                   | CMT Summary *         | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
|                             | Core Analysis         | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 401481311                   | 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>    |                       |   |
| 401481310                   | DIRECTIONAL DATA      | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401481366                   | LAS-CEMENT BOND       | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401481367                   | PDF-CEMENT BOND       | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401481381                   | LAS-DUAL INDUCTION    | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401481387                   | PDF-DUAL INDUCTION    | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401481747                   | LAS-MWD/LWD           | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401481748                   | PDF-MWD/LWD           | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401481749                   | PDF-MWD/LWD           | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401481752                   | LAS-MUD               | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401485796                   | 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)