

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:
401494599

Date Received:

Completion Type Final completion Preliminary completion

OGCC Operator Number: 69175 Contact Name: Kelsi Welch

Name of Operator: PDC ENERGY INC Phone: (303) 831-3974

Address: 1775 SHERMAN STREET - STE 3000 Fax: _____

City: DENVER State: CO Zip: 80203

API Number 05-123-21778-00 County: WELD

Well Name: FRENCH Well Number: 41-4

Location: QtrQtr: NENE Section: 4 Township: 5N Range: 64W Meridian: 6

Footage at surface: Distance: 660 feet Direction: FNL Distance: 760 feet Direction: FEL

As Drilled Latitude: _____ As Drilled Longitude: _____

GPS Data:

Date of Measurement: _____ PDOP Reading: _____ GPS Instrument Operator's Name: _____

** If directional footage at Top of Prod. Zone Dist.: _____ feet. Direction: _____ Dist.: _____ feet. Direction: _____

Sec: _____ Twp: _____ Rng: _____

** If directional footage at Bottom Hole Dist.: _____ feet. Direction: _____ Dist.: _____ feet. Direction: _____

Sec: _____ Twp: _____ Rng: _____

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 02/17/2004 Date TD: _____ Date Casing Set or D&A: _____

Rig Release Date: 02/24/2004 Per Rule 308A.b.

Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 7065 TVD** _____ Plug Back Total Depth MD 7004 TVD** _____

Elevations GR 4622 KB 4634 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:

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 |
|-------------|--------------|----------------|-------|---------------|---------------|-----------|---------|---------|--------|
| SURF | 12+1/4 | 8+5/8 | 24 | 0 | 368 | 320 | 0 | 368 | |
| 1ST | 7+7/8 | 4+1/2 | 11.6 | 0 | 7,036 | 545 | 550 | 7,036 | CBL |

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 11/30/2017

| Method used | String | Cementing tool setting/perf depth | Cement volume | Cement top | Cement bottom |
|-------------|--------|-----------------------------------|---------------|------------|---------------|
| 1 INCH | 1ST | 551 | 146 | 0 | 551 |

Details of work:

Producing Formation (Perforations): Niobrara: 6544'-6674' Codell: 6786'-6802'
 TD: 7065' PBTD: 7004'
 Surface Casing: 8 5/8" 24# @ 368' w/ 320 sxs
 Production Casing: 4 1/2" 11.6# @ 7036' w/ 545 sxs cmt (TOC @ 550' - CBL).

Tubing: 2 3/8" tubing set @ 6500' (8/31/2004).

Procedure:

1. MIRU pulling unit. Pull 2 3/8" tubing.
2. ND WH. Spear 4 1/2" production casing to remove out of slips. Unland casing pulling 120K.
3. TIH w/ 1 1/4" 3.02# CS Hydril stick pipe to 551' in production casing annular space. Mix and pump 146 sxs cmt to Surface. Pull 1 1/4" tubing.
4. Set slips and NU WH. TIH w/ tubing.
5. RDMO WO rig. Return well to production.

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 | |
| | | | | | |

Comment:

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

Signed: _____ Print Name: Kelsi Welch

Title: Production Tech Date: _____ Email: kelsi.welch@pdce.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|-----------------------|---|--|
| Attachment Checklist | | | |
| 401494607 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| | Directional Survey ** | Yes <input type="checkbox"/> | No <input checked="" 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 | | | |
| 401494605 | PDF-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401494608 | OPERATIONS SUMMARY | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

General Comments

User Group

Comment

Comment Date

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

Total: 0 comment(s)