

FORM
5
Rev
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



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Document Number:
401480909

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: 10633 Contact Name: Renee Kendrick
 Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC Phone: (303) 309-1931
 Address: 1801 CALIFORNIA STREET #2500 Fax: _____
 City: DENVER State: CO Zip: 80202

API Number 05-123-45805-00 County: WELD
 Well Name: Kiyota Well Number: 4N-35H-O367
 Location: QtrQtr: SWSE Section: 35 Township: 3N Range: 67W Meridian: 6
 Footage at surface: Distance: 452 feet Direction: FSL Distance: 1429 feet Direction: FEL
 As Drilled Latitude: 40.175555 As Drilled Longitude: -104.853432

GPS Data:
 Date of Measurement: 11/29/2017 PDOP Reading: 1.3 GPS Instrument Operator's Name: Jason Dahlman

** If directional footage at Top of Prod. Zone Dist.: 475 feet. Direction: FSL Dist.: 380 feet. Direction: FEL
 Sec: 35 Twp: 3N Rng: 67W
 ** If directional footage at Bottom Hole Dist.: 466 feet. Direction: FNL Dist.: 251 feet. Direction: FEL
 Sec: 35 Twp: 3N Rng: 67W

Field Name: WATTENBERG Field Number: 90750
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 11/07/2017 Date TD: 11/15/2017 Date Casing Set or D&A: 11/16/2017
 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 11875 TVD** 7383 Plug Back Total Depth MD 11827 TVD** 7382

Elevations GR 4841 KB 4864 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
PNL, Mud Log, CBL, MWD

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	52.78	0	121	114	0	121	VISU
SURF	13+1/2	9+5/8	40	0	2,047	783	0	2,047	VISU
1ST	8+1/2	5+1/2	20	0	11,858	1,729	0	11,875	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	
SUSSEX	4,343				
SHANNON	4,899				
TEEPEE BUTTES	6,285				
SHARON SPRINGS	7,149				
NIOBRARA	7,259				
FORT HAYS	7,741				
CODELL	7,856				

Comment:

TPZ footages are estimated; well is not completed, anticipated completion date January 2018.

No open-hole logs were run; Cased-hole Pulsed Neutron Log was run on the Kiyota 4N-35H-0367 well, 123-45805; per BMP on APD; Rule 317.p exception granted for the well.

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

Signed: _____

Print Name: Renee Kendrick

Title: Regulatory Coordinator

Date: _____

Email: renee.kendrick@crestonepr.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401507260	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401507259	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			
401507249	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507250	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507252	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507253	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507254	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507255	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507256	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401507258	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)