

**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:  
400722882

Date Received:

Completion Type  Final completion  Preliminary completion

OGCC Operator Number: 69175 Contact Name: Ally Ota

Name of Operator: PDC ENERGY INC Phone: (303) 860-5800

Address: 1775 SHERMAN STREET - STE 3000 Fax: (303) 860-5838

City: DENVER State: CO Zip: 80203

API Number 05-123-19405-00 County: WELD

Well Name: P & A FARMS Well Number: 28-2

Location: QtrQtr: NESE Section: 28 Township: 5N Range: 64W Meridian: 6

Footage at surface: Distance: 1813 feet Direction: FSL Distance: 860 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.: 1813 feet. Direction: FSL Dist.: 860 feet. Direction: FEL  
Sec: 28 Twp: 5N Rng: 68W

\*\* If directional footage at Bottom Hole Dist.: 1813 feet. Direction: FSL Dist.: 860 feet. Direction: FEL  
Sec: 28 Twp: 5N Rng: 68W

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: 69083

Spud Date: (when the 1st bit hit the dirt) 06/24/1997 Date TD: 06/28/1997 Date Casing Set or D&A: 07/01/1997

Rig Release Date: 10/08/2014 Per Rule 308A.b.

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

Total Depth MD 6980 TVD\*\* 6980 Plug Back Total Depth MD 6938 TVD\*\* 6938

Elevations GR 4631 KB 4641 **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	360	250	0	360	
1ST	7+7/8	4+1/2	11.6	0	6,980	250	5,996	6,980	

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: 10/08/2014

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
1 INCH	1ST	5,963	200	4,905	5,963

Details of work:

Annular Fill with 200 sx 12.5# premium lite cement

### **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:

Form is being submitted to report an annular fill done in 2014.

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

Signed: \_\_\_\_\_ Print Name: Ally Ota \_\_\_\_\_

Title: Regulatory Tech Date: \_\_\_\_\_ Email: alexandria.ota@pdce.com

### **Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
401513712	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"/>
<b>Other Attachments</b>			
401513705	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401513706	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### **General Comments**

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)