

**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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**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 05-123-45830-00 County: WELD  
 Well Name: File Well Number: 3A-32H-K268  
 Location: QtrQtr: NESW Section: 32 Township: 2N Range: 68W Meridian: 6  
 Footage at surface: Distance: 1760 feet Direction: FSL Distance: 1592 feet Direction: FWL  
 As Drilled Latitude: 40.092576 As Drilled Longitude: -105.031218

GPS Data:  
 Date of Measurement: 03/14/2018 PDOP Reading: 2.0 GPS Instrument Operator's Name: Jason Dahlman

\*\* If directional footage at Top of Prod. Zone Dist.: 1551 feet. Direction: FSL Dist.: 78 feet. Direction: FEL  
 Sec: 32 Twp: 2N Rng: 68W  
 \*\* If directional footage at Bottom Hole Dist.: 468 feet. Direction: FSL Dist.: 85 feet. Direction: FWL  
 Sec: 5 Twp: 1N Rng: 68W

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

Spud Date: (when the 1st bit hit the dirt) 11/15/2017 Date TD: 11/28/2017 Date Casing Set or D&A: 11/29/2017  
 Rig Release Date: 02/20/2018 Per Rule 308A.b.

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

Total Depth MD 14664 TVD\*\* 7726 Plug Back Total Depth MD 14611 TVD\*\* 7728

Elevations GR 4970 KB 4993 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
Mud Log, MWD/LWD, CBL, (Pulsed Neutron in 123-38072)

**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	20	52.78	0	121	190	0	121	VISU
SURF	12+1/4	9+5/8	40	0	1,896	726	0	1,896	VISU
1ST	8+3/4	5+1/2	20	0	14,644	2,260	0	14,644	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	4,382				
SHANNON	5,018				
SHARON SPRINGS	7,395				
NIOBRARA	7,498				
FORT HAYS	7,994				
CODELL	8,895				

Comment:

TPZ footages are estimated; well is not completed. Estimated completion Q2 2018.

No open-hole logs were run; Cased-hole Pulsed Neutron Log was run on the File 3G-32H-K268 well, 123-38072; 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 ?	
<b>Attachment Checklist</b>			
401594269	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401594172	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>			
401593999	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401594163	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401594164	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401594165	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401594167	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401594171	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)