

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:
401605458

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 & PRODUCTION LLC Phone: (720) 420-5747
 Address: 730 17TH ST STE 500 Fax: _____
 City: DENVER State: CO Zip: 80202

API Number 05-123-45593-00 County: WELD
 Well Name: Booth Well Number: V-8-7HN
 Location: QtrQtr: SESE Section: 8 Township: 6N Range: 66W Meridian: 6
 Footage at surface: Distance: 1246 feet Direction: FSL Distance: 248 feet Direction: FEL
 As Drilled Latitude: 40.498805 As Drilled Longitude: -104.793338

GPS Data:
 Date of Measurement: 11/22/2017 PDOP Reading: 2.0 GPS Instrument Operator's Name: AARON RIVERA

** If directional footage at Top of Prod. Zone Dist.: 521 feet. Direction: FSL Dist.: 470 feet. Direction: FEL
 Sec: 8 Twp: 6N Rng: 66W
 ** If directional footage at Bottom Hole Dist.: 530 feet. Direction: FSL Dist.: 2180 feet. Direction: FEL
 Sec: 7 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) 12/01/2017 Date TD: 03/02/2018 Date Casing Set or D&A: 03/04/2018
 Rig Release Date: 03/19/2018 Per Rule 308A.b.

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

Total Depth MD 16310 TVD** 7134 Plug Back Total Depth MD 16278 TVD** 7134

Elevations GR 4807 KB 4825 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
MWD, Mud, CBL, DIL in API# 05-123-12093 and API# 05-123-22620

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	16	42	0	80	400	0	80	VISU
SURF	13+1/2	9+5/8	36	0	1,545	415	0	1,545	VISU
1ST	8+1/2	5+1/2	20	0	16,304	2,401	910	16,304	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	3,854		NO	NO	
SUSSEX	4,216		NO	NO	
SHANNON	4,600		NO	NO	
SHARON SPRINGS	7,245		NO	NO	
NIOBRARA	7,296		NO	NO	

Comment:

The "As Builts" were done on the Conductor Casing which was previously set.

The stated footages for the TPZ are at MD 9282', TVD 7158', if changed upon completion this will be updated on the Form 5A.
The stated footages for the BHL are at MD 16310', TVD 7134', if changed upon completion this will be updated on the Form 5A (THIS DEPTH IS STATED ON THE LAST LINE ON PAGE 7 OF THE AS DRILLED DIRECTIONAL SURVEY)

No open-hole resistivity logs were run and a Rule 317.p Exception was granted for this well.
Completion anticipated for 2nd to 3rd quarter, 2018.

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 ?	
Attachment Checklist			
401628335	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401628334	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			
401628333	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401628339	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401628340	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401628345	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401628346	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401628347	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401628348	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401628350	PDF-MWD/LWD	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)