

FORM
5Rev
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:

401641486

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: 8960

Contact Name: Brian Dodek

Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY

Phone: (720) 2256653

Address: 410 17TH STREET SUITE #1400

Fax:

City: DENVER State: CO Zip: 80202

API Number 05-123-44113-00

County: WELD

Well Name: State Pronghorn

Well Number: V-29-30XRLNB

Location: QtrQtr: SWNW Section: 28 Township: 5N Range: 61W Meridian: 6

Footage at surface: Distance: 1338 feet Direction: FNL Distance: 548 feet Direction: FWL

As Drilled Latitude: 40.375468 As Drilled Longitude: -104.221654

GPS Data:

Date of Measurement: 04/26/2018 PDOP Reading: 1.4 GPS Instrument Operator's Name: Dave Fehring

** If directional footage at Top of Prod. Zone Dist.: 1189 feet. Direction: FNL Dist.: 478 feet. Direction: FEL

Sec: 29 Twp: 5N Rng: 61W

** If directional footage at Bottom Hole Dist.: 1169 feet. Direction: FNL Dist.: 466 feet. Direction: FWL

Sec: 30 Twp: 5N Rng: 61W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 02/25/2018 Date TD: 03/09/2018 Date Casing Set or D&A: 02/25/2018

Rig Release Date: 03/22/2018 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 16187 TVD** 6094 Plug Back Total Depth MD 16111 TVD** 6094

Elevations GR 4618 KB 4635 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

CBL, MUD, MWD, (IND & GR in API # 123-38633)

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	13+1/2	9+5/8	36	0	1,606	744	0	1,606	VISU
1ST	8+1/2	5+1/2	17	0	16,177	2,570	0	16,177	VISU

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	3,244		NO	NO	
SHARON SPRINGS	5,886		NO	NO	
NIOBRARA	6,096		NO	NO	

Comment:

TPZ is estimated based on planned shallowest perf, actual TPZ will be submitted on the form 5A. Completions on this well are expected to begin June, 2018.

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

Signed: _____ Print Name: Ariana Solis

Title: Regulatory Analyst Date: _____ Email: asolis@bonanzacrk.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
401644478	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
401644474	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"/>
<u>Other Attachments</u>					
401644453	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401644457	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401644458	LAS-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401644461	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401644468	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401644472	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)