

**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:  
401641489

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 05-123-44111-00 County: WELD  
 Well Name: State Pronghorn Well Number: 41-29-30XRLNB  
 Location: QtrQtr: NWNW Section: 28 Township: 5N Range: 61W Meridian: 6  
 Footage at surface: Distance: 1318 feet Direction: FNL Distance: 548 feet Direction: FWL  
 As Drilled Latitude: 40.375523 As Drilled Longitude: -104.221653

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

\*\* If directional footage at Top of Prod. Zone Dist.: 580 feet. Direction: FNL Dist.: 545 feet. Direction: FEL  
 Sec: 29 Twp: 5N Rng: 61W  
 \*\* If directional footage at Bottom Hole Dist.: 659 feet. Direction: FNL Dist.: 536 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: 03/04/2018 Date Casing Set or D&A: 02/26/2018  
 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 16112 TVD\*\* 6107 Plug Back Total Depth MD 16037 TVD\*\* 6107

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	1,602	744	0	1,602	VISU
1ST	8+1/2	5+1/2	17	0	16,102	2,579	0	16,102	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	3,250		NO	NO	
SHARON SPRINGS	6,000		NO	NO	
NIOBRARA	6,249		NO	NO	

Comment:

TPZ is estimated, actual TPZ will be submitted on the form 5A. Completions on this well are expected to begin in mid 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 ?	
<b>Attachment Checklist</b>			
401644618	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401644614	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>			
401644599	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401644600	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401644602	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401644604	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401644605	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401644609	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

**User Group**

**Comment**

**Comment Date**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
		Stamp Upon Approval

Total: 0 comment(s)