

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



DE ET OE ES

Document Number:

401598581

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: 69175

Contact Name: Ally Ota

Name of Operator: PDC ENERGY INC

Phone: (303) 860-5800

Address: 1775 SHERMAN STREET - STE 3000

Fax: (303) 831-3988

City: DENVER State: CO Zip: 80203

API Number 05-123-44676-00

County: WELD

Well Name: Josephine

Well Number: 19N-204

Location: QtrQtr: SWNE Section: 19 Township: 5N Range: 64W Meridian: 6

Footage at surface: Distance: 1789 feet Direction: FNL Distance: 2215 feet Direction: FEL

As Drilled Latitude: 40.386970 As Drilled Longitude: -104.591280

GPS Data:

Date of Measurement: 10/20/2017 PDOP Reading: 1.3 GPS Instrument Operator's Name: Devin Arnold

** If directional footage at Top of Prod. Zone Dist.: 1518 feet. Direction: FNL Dist.: 1683 feet. Direction: FEL

Sec: 19 Twp: 5N Rng: 64W

** If directional footage at Bottom Hole Dist.: 1518 feet. Direction: FNL Dist.: 2459 feet. Direction: FEL

Sec: 24 Twp: 5N Rng: 64W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 08/04/2017 Date TD: 08/09/2017 Date Casing Set or D&A: 08/10/2017

Rig Release Date: 09/05/2017 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 12788 TVD** 6696 Plug Back Total Depth MD 12772 TVD** 6696

Elevations GR 4626 KB 4649 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, MWD, (DIL in 123-24774 & 123-23345)

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 | 9+5/8 | 36 | 0 | 1,650 | 760 | 0 | 1,650 | VISU |
| 1ST | 8+1/2 | 5+1/2 | 20 | 0 | 12,786 | 2,158 | 1,780 | 12,786 | 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 | 3,548 | | | | |
| SUSSEX | 4,067 | | | | |
| SHANNON | 4,965 | | | | |
| SHARON SPRINGS | 6,602 | | | | |
| NIOBRARA | 6,760 | | | | |

Comment:

Open hole logging exception; No open hole logs were run. Cased hole neutron run on Josephine 19M-404 (API: 05-123-44674). Top of Productive Zone footages are estimated based on 60 degree landing point footages. This well has not yet been completed. Anticipated date of completion 2nd 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: Cassie Gonzalez

Title: Regulatory Contractor Date: _____ Email: Cassie.Gonzalez@pdce.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | | | |
|-----------------------------|-----------------------|------------|-------------------------------------|----|-------------------------------------|
| <u>Attachment Checklist</u> | | | | | |
| 401598709 | CMT Summary * | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| | Core Analysis | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> |
| 401598710 | 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> | | | | | |
| 401598675 | LAS-CBL 1ST RUN | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| 401598676 | PDF-CBL 1ST RUN | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| 401598682 | LAS-MWD/LWD | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| 401598684 | PDF-MWD/LWD | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| 401598685 | PDF-MWD/LWD | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| 401598686 | PDF-MWD/LWD | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| 401598688 | PDF-MWD/LWD | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| 401598711 | DIRECTIONAL DATA | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| 401646218 | WELLBORE DIAGRAM | 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)