

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:

401621969

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: 10110

Contact Name: Miracle Pfister

Name of Operator: GREAT WESTERN OPERATING COMPANY LLC

Phone: (303) 398-0550

Address: 1001 17TH STREET #2000

Fax:

City: DENVER

State: CO

Zip: 80202

API Number 05-123-41747-00

County: WELD

Well Name: Schneider HD

Well Number: 11-392HN

Location: QtrQtr: SWSW Section: 7 Township: 4N Range: 66W Meridian: 6

Footage at surface: Distance: 1120 feet Direction: FSL Distance: 280 feet Direction: FWL

As Drilled Latitude: 40.322278 As Drilled Longitude: -104.828725

GPS Data:

Date of Measurement: 11/05/2015 PDOP Reading: 1.6 GPS Instrument Operator's Name: CHAD MEIERS

** If directional footage at Top of Prod. Zone Dist.: 3 feet. Direction: FSL Dist.: 599 feet. Direction: FEL

Sec: 12 Twp: 4N Rng: 67W

** If directional footage at Bottom Hole Dist.: 4 feet. Direction: FSL Dist.: 2168 feet. Direction: FEL

Sec: 11 Twp: 4N Rng: 67W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 09/24/2015 Date TD: 10/24/2015 Date Casing Set or D&A: 10/25/2015

Rig Release Date: 10/26/2015 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 14707 TVD** 7011 Plug Back Total Depth MD 14656 TVD** 7012

Elevations GR 4735 KB 4751

Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, Mud Log, MWD/LWD, (Triple Combo in API# 123-41746)

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	1,427	640	0	1,427	VISU
1ST	7+7/8	5+1/2	17	0	14,704	1,802	5,410	14,704	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	3,634	3,777	NO	NO	
SUSSEX	4,108	4,382	NO	NO	
SHANNON	4,691	4,763	NO	NO	
SHARON SPRINGS	7,028	7,157	NO	NO	
NIOBRARA	7,157		NO	NO	

Comment:

This well was drilled during the first rig occupation.

An exception to Rule 317.p, Requirement to Log Well, was approved for this well. No open hole resistivity log with gamma ray was run. This log was run in the SCHNEIDER HD 11-369HC (API # 123-41746) in the form of a Triple Combo.

The attached MWD log incorrectly borehole record and mud record total depth. The correct depth is 14707'.

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

Signed: _____

Print Name: Jack Desmond

Title: Regulatory Analyst

Date: _____

Email: jdesmond@gwogco.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
401622000	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401621998	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>			
401621997	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401631091	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401631092	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401631093	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401631094	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401641527	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401642132	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)