

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:

401883804

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: Kate Miller

Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY

Phone: (720) 440-6133

Address: 410 17TH STREET SUITE #1400

Fax:

City: DENVER State: CO Zip: 80202

API Number 05-123-47807-00

County: WELD

Well Name: Wetco Farms

Well Number: A11-4-9MRLNB

Location: QtrQtr: NWNW Section: 4 Township: 4N Range: 63W Meridian: 6

Footage at surface: Distance: 346 feet Direction: FNL Distance: 172 feet Direction: FWL

As Drilled Latitude: 40.347741 As Drilled Longitude: -104.451679

GPS Data:

Date of Measurement: 12/31/2018 PDOP Reading: 1.3 GPS Instrument Operator's Name: Greg Weimer

** If directional footage at Top of Prod. Zone Dist.: 470 feet. Direction: FNL Dist.: 375 feet. Direction: FWL

Sec: 4 Twp: 4N Rng: 63W

** If directional footage at Bottom Hole Dist.: 2164 feet. Direction: FNL Dist.: 374 feet. Direction: FWL

Sec: 9 Twp: 4N Rng: 63W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 10/24/2018 Date TD: 10/29/2018 Date Casing Set or D&A: 10/30/2018

Rig Release Date: 11/16/2018 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 13657 TVD** 6290 Plug Back Total Depth MD 13599 TVD** 6290

Elevations GR 4570 KB 4587 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

MUD, CBL, MWD/LWD, (DEN/NEU in 123-22501)

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	1,600	720	0	1,600	VISU
1ST	8+1/2	5+1/2	17	0	13,647	2,122	1,600	13,657	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	3,346				
SHARON SPRINGS	6,112				
NIOBRARA	6,427				

Comment:

TPZ was estimated, actual TPZ will be listed on the form 5A.

No open hole log was ran on this well. A Dual Induction Compensated Density Nuetron log was ran on an offset well the Wetco 11-4 (123-22501).

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

Signed: _____

Print Name: Aubrey Noonan

Title: Regulatory Analyst Date: _____ Email: ANoonan2@bonanzacrk.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
401903705	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401918342	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>			
401903735	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401903747	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401903748	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401903750	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401903752	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401903753	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401918341	DIRECTIONAL DATA	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)

