

DRILLING COMPLETION REPORT

Document Number:
401884022

Date Received:

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 05-123-47808-00 County: WELD
 Well Name: Wetco Farms Well Number: 21-4-9MRLNB
 Location: QtrQtr: NWNW Section: 4 Township: 4N Range: 63W Meridian: 6
 Footage at surface: Distance: 346 feet Direction: FNL Distance: 232 feet Direction: FWL
 As Drilled Latitude: 40.347740 As Drilled Longitude: -104.451462

GPS Data:
 Date of Measurement: 12/31/2108 PDOP Reading: 1.2 GPS Instrument Operator's Name: Greg Weimer

** If directional footage at Top of Prod. Zone Dist.: 541 feet. Direction: FNL Dist.: 2036 feet. Direction: FWL
 Sec: 4 Twp: 4N Rng: 63W
 ** If directional footage at Bottom Hole Dist.: 2184 feet. Direction: FNL Dist.: 1973 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) 10/22/2018 Date TD: 11/09/2018 Date Casing Set or D&A: 11/10/2018
 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 13955 TVD** 6293 Plug Back Total Depth MD 13898 TVD** 6293
 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	13,945	2,172	862	13,955	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	3,458				
SHARON SPRINGS	6,467				
NIOBRARA	6,872				

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 Neutron log was ran on an offset well the Wetco 11-4 (123-22501).

Spud date on MUD incorrect, correct date reported on form.

Date TD reached on MUD incorrect, correct date reported on form.

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@bonanzacr.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401884028	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401918329	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"/>
Other Attachments			
401884050	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401884067	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401884071	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401884074	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401903851	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401918327	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401926659	PDF-CEMENT BOND	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)

