

DRILLING COMPLETION REPORT

Document Number:
401948097

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: 10633 Contact Name: Logan Siple
 Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC Phone: (303) 5792174
 Address: 1801 CALIFORNIA STREET #2500 Fax: _____
 City: DENVER State: CO Zip: 80202

API Number 05-123-47729-00 County: WELD
 Well Name: Herren Well Number: 1F-33H-H367
 Location: QtrQtr: SENE Section: 33 Township: 3N Range: 67W Meridian: 6
 Footage at surface: Distance: 2285 feet Direction: FNL Distance: 397 feet Direction: FEL
 As Drilled Latitude: 40.183205 As Drilled Longitude: -104.887167

GPS Data:
 Date of Measurement: 02/13/2018 PDOP Reading: 1.3 GPS Instrument Operator's Name: Dominick Davis

** If directional footage at Top of Prod. Zone Dist.: 1203 feet. Direction: FNL Dist.: 460 feet. Direction: FEL
 Sec: 33 Twp: 3N Rng: 67W
 ** If directional footage at Bottom Hole Dist.: 1208 feet. Direction: FNL Dist.: 465 feet. Direction: FWL
 Sec: 33 Twp: 3N Rng: 67W

Field Name: WATTENBERG Field Number: 90750
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 11/25/2018 Date TD: 12/22/2018 Date Casing Set or D&A: 12/24/2018
 Rig Release Date: 01/12/2018 Per Rule 308A.b.

Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 12098 TVD** 7342 Plug Back Total Depth MD 12077 TVD** 7342
 Elevations GR 4848 KB 4871 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
Mud Log, MWD/LWD, CBL, CHPN

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
CONDUCTOR	24	16	42.09	0	121	68	0	121	VISU
SURF	13+1/2	9+5/8	40	0	1,973	762	0	1,988	VISU
1ST	8+1/2	13+1/2	20	0	12,087	1,680	1,918	12,098	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	
SUSSEX	4,309		NO	NO	
SHANNON	4,835		NO	NO	
TEEPEE BUTTES	6,299		NO	NO	
SHARON SPRINGS	7,144		NO	NO	
NIOBRARA	7,228		NO	NO	
FORT HAYS	7,651		NO	NO	
CODELL	7,733		NO	NO	

Comment:

Open Hole Logging Exception - No open-hole logs were run; Cased-hole Pulsed Neutron Log was run on this well, Herren 1F-33H-H367, 123-47729; per BMP on APD; Rule 317.p exception granted for the well.

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

Signed: _____

Print Name: Logan Siple

Title: Drilling Technician

Date: _____

Email: logan.siple@crestonepr.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401953077	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401948224	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			
401948221	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401952927	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401952930	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401952977	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401952984	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401953049	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401953050	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401962296	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401962300	PDF-PULSED NEUTRON	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)

