

**DRILLING COMPLETION REPORT**

Document Number:  
401901641

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: 10456 Contact Name: Reed Haddock  
 Name of Operator: CAERUS PICEANCE LLC Phone: (720) 880-6369  
 Address: 1001 17TH STREET #1600 Fax: (303) 565-4606  
 City: DENVER State: CO Zip: 80202

API Number 05-045-23873-00 County: GARFIELD  
 Well Name: NPR Well Number: 11C-9-596  
 Location: QtrQtr: SENW Section: 9 Township: 5S Range: 96W Meridian: 6  
 Footage at surface: Distance: 1690 feet Direction: FNL Distance: 2472 feet Direction: FWL  
 As Drilled Latitude: 39.632175 As Drilled Longitude: -108.174756

GPS Data:  
 Date of Measurement: 02/28/2019 PDOP Reading: 1.8 GPS Instrument Operator's Name: John Floyd

\*\* If directional footage at Top of Prod. Zone Dist.: 766 feet. Direction: FNL Dist.: 1488 feet. Direction: FWL  
 Sec: 9 Twp: 5S Rng: 96W  
 \*\* If directional footage at Bottom Hole Dist.: 836 feet. Direction: FNL Dist.: 1327 feet. Direction: FWL  
 Sec: 9 Twp: 5S Rng: 96W

Field Name: WILDCAT Field Number: 99999  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 01/10/2019 Date TD: 01/17/2019 Date Casing Set or D&A: 01/20/2019  
 Rig Release Date: 02/17/2019 Per Rule 308A.b.

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

Total Depth MD 10185 TVD\*\* 10016 Plug Back Total Depth MD 10125 TVD\*\* 9957

Elevations GR 7649 KB 7673 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
CBL, PNL

**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	30	20	54#	0	100	218	0	100	VISU
SURF	14+3/4	9+5/8	36#	0	2,465	745	0	2,465	VISU
1ST	8+3/4	4+1/2	11.6#	0	10,173	965	4,300	10,173	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	
GREEN RIVER	0	2,841	NO	NO	
WASATCH	2,841	4,476	NO	NO	
WASATCH G	4,476	4,933	NO	NO	
FORT UNION	4,933	6,665	NO	NO	
OHIO CREEK	6,665	6,958	NO	NO	
WILLIAMS FORK	6,958	9,366	NO	NO	
CAMEO	9,366	10,004	NO	NO	
ROLLINS	10,004		NO	NO	

Comment:

All casing and cement information and formation tops are measured from KB. Per the approved Form 2 APD for the subject well, one gamma ray and one resistivity log was required for this multi-well pad. Please refer to the open hole logs submitted with the NPR 11C-9-596 (API# 05-045-23873).

Both CBL and PNL are attached in one document (LAS and PDF).

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

Signed: \_\_\_\_\_

Print Name: Reed Haddock

Title: Sr. Regulatory Specialist

Date: \_\_\_\_\_

Email: rhaddock@caerusoilandgas.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
401904709	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401908333	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"/>
<b>Other Attachments</b>			
401908334	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401983194	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401987238	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401987245	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401987246	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401987247	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)

