

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.

Document Number:
400725839

Date Received:

Completion Type Final completion Preliminary completion

OGCC Operator Number: 69175 Contact Name: Cassie Gonzalez

Name of Operator: PDC ENERGY INC Phone: (303) 860-5800

Address: 1775 SHERMAN STREET - STE 3000 Fax: (303) 831-3988

City: DENVER State: CO Zip: 80203

API Number 05-123-37311-00 County: WELD

Well Name: Sorin Natural Resources Well Number: 2U-443

Location: QtrQtr: NWNE Section: 2 Township: 4N Range: 66W Meridian: 6

Footage at surface: Distance: 20 feet Direction: FNL Distance: 1364 feet Direction: FEL

As Drilled Latitude: 40.348440 As Drilled Longitude: -104.739630

GPS Data:
Date of Measurement: 10/20/2014 PDOP Reading: 1.6 GPS Instrument Operator's Name: Devin Arnold

** If directional footage at Top of Prod. Zone Dist.: 821 feet. Direction: FNL Dist.: 443 feet. Direction: FEL
Sec: 2 Twp: 4N Rng: 66W

** If directional footage at Bottom Hole Dist.: 502 feet. Direction: FSL Dist.: 375 feet. Direction: FEL
Sec: 2 Twp: 4N Rng: 66W

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 08/23/2014 Date TD: 09/05/2014 Date Casing Set or D&A: 09/07/2014

Rig Release Date: 09/30/2014 Per Rule 308A.b.

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

Total Depth MD 11724 TVD** 7140 Plug Back Total Depth MD 11716 TVD** 7140

Elevations GR 4671 KB 4684 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, MWD

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	896	750	0	896	VISU
1ST	8+3/4	7	26	0	7,616	658	0	7,616	CBL
1ST LINER	6+1/8	4+1/2	13.5	7435	11,720				

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	3,672				
SUSSEX	4,325				
SHANNON	4,819				
SHARON SPRINGS	6,685				
NIOBRARA	6,913				
FORT HAYS	7,682				
CODELL	9,215				
CARLILE	10,481				

Comment:

No open hole logs were run on this pad. APD was approved in 2013 with no logging BMPs or exceptions. 7" TOC at surface due to 14 bbls cement returned to surface, 11.2 ppg lead.

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

Signed: _____

Print Name: Cassie Gonzalez

Title: Regulatory Technician

Date: _____

Email: Cassie.Gonzalez@pdce.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401970648	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401970647	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			
401970630	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401970638	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401970642	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401970644	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401970649	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Returned to draft for AOC settlement.	09/13/2016

Total: 1 comment(s)

