

FORM 5
Rev 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



DE ET OE ES

Document Number:
402033125

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) 440-6116
Address: 410 17TH STREET SUITE #1400 Fax:
City: DENVER State: CO Zip: 80202

API Number 05-123-48257-00 County: WELD
Well Name: Antelope Well Number: 24-19-18XRLNB
Location: QtrQtr: SWSE Section: 19 Township: 5N Range: 62W Meridian: 6
Footage at surface: Distance: 225 feet Direction: FSL Distance: 1308 feet Direction: FEL
As Drilled Latitude: 40.378349 As Drilled Longitude: -104.361402

GPS Data:
Date of Measurement: 02/11/2019 PDOP Reading: 1.5 GPS Instrument Operator's Name: Allen Shaffett

** If directional footage at Top of Prod. Zone Dist.: 470 feet. Direction: FSL Dist.: 1870 feet. Direction: FWL
Sec: 19 Twp: 5N Rng: 62W
** If directional footage at Bottom Hole Dist.: 492 feet. Direction: FNL Dist.: 1654 feet. Direction: FWL
Sec: 18 Twp: 5N Rng: 62W

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

Spud Date: (when the 1st bit hit the dirt) 03/11/2019 Date TD: 03/17/2019 Date Casing Set or D&A: 03/19/2019
Rig Release Date: 03/19/2019 Per Rule 308A.b.

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

Total Depth MD 16964 TVD** 6399 Plug Back Total Depth MD 16905 TVD** 6399

Elevations GR 4658 KB 4675 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
Mud, CBL, MWD/LWD, (Resistivity 123-48258)

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	1,624	520	0	1,624	VISU
1ST	8+1/2	5+1/2	20	0	16,954	2,550	86	16,964	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	3,543				
SHARON SPRINGS	6,709				
NIOBRARA	6,917				

Comment:

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

No open-hole logs were run. A Resistivity log was run on ANTELOPE O24-19-18XRLNC (123-48258).

Spud date reported on mud log is incorrect. Correct spud date reported on this form.

Elevations on CBL are incorrect. Correct elevations are listed on this form.

Formation tops called out on mudlogs are incorrect, as they were determined by outside mud log contractors. Bonanza Creek geologists have determined correct formation tops. The correct formation tops are reported on this 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: regulatory@bonanzacr.com _____

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
402035249	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402061249	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			
402035284	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402035285	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402060812	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402061040	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402061041	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402061042	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402061246	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)

