

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



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Document Number:
402078984

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 05-123-49091-00 County: WELD
 Well Name: ANTELOPE FEDERAL Well Number: 34-20-17XRLNC
 Location: QtrQtr: SWSE Section: 20 Township: 5N Range: 62W Meridian: 6
 Footage at surface: Distance: 749 feet Direction: FSL Distance: 2356 feet Direction: FEL
 As Drilled Latitude: 40.379926 As Drilled Longitude: -104.346615

GPS Data:
 Date of Measurement: 06/03/2019 PDOP Reading: 1.3 GPS Instrument Operator's Name: Greg Weimer

** If directional footage at Top of Prod. Zone Dist.: 0 feet. Direction: FSL Dist.: 1935 feet. Direction: FEL
 Sec: 20 Twp: 5N Rng: 62W
 ** If directional footage at Bottom Hole Dist.: 482 feet. Direction: FNL Dist.: 2098 feet. Direction: FEL
 Sec: 17 Twp: 5N Rng: 62W

Field Name: WATTENBERG Field Number: 90750
 Federal, Indian or State Lease Number: COC27517

Spud Date: (when the 1st bit hit the dirt) 04/23/2019 Date TD: 05/26/2019 Date Casing Set or D&A: 05/27/2019
 Rig Release Date: 05/28/2019 Per Rule 308A.b.

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

Total Depth MD 16999 TVD** 6436 Plug Back Total Depth MD 16942 TVD** 6436

Elevations GR 4657 KB 4674 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
Mud, CBL, MWD/LWD, (Resistivity 123-49090)

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	1,626	525	0	1,626	VISU
1ST	8+1/2	5+1/2	20	0	16,988	2,580	330	16,999	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	3,577				
SHARON SPRINGS	6,380				
NIOBRARA	6,564				

Comment:

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

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

No open-hole logs were run. A Resistivity log was run on ANTELOPE FEDERAL 44-20-17XRLNC (05-123-49090)

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@bonanzacrk.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
402085674	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402100451	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			
402085685	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402085695	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402085731	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402085733	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402085770	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402085832	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402100453	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402100600	LAS-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)

