

FORM  
5Rev  
10/14State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402143012

Date Received:

## DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and/or cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 10518

Contact Name: Brittany Rothe

Name of Operator: CONFLUENCE DJ LLC

Phone: (303) 994-3064

Address: 1001 17TH STREET #1250

Fax:

City: DENVER

State: CO

Zip: 80202

Email: paul.gottlob@iptenergyservices.com

API Number 05-123-47594-00

County: WELD

Well Name: 70 Ranch

Well Number: 10-15-3L

Location: QtrQtr: SWSW

Section: 3

Township: 4N

Range: 63W

Meridian: 6

FNL/FSL

FEL/FWL

Footage at surface: Distance: 260 feet

Direction: FSL

Distance: 1236 feet

Direction: FWL

As Drilled Latitude: 40.334760

As Drilled Longitude: -104.429410

GPS Data:

Date of Measurement: 08/14/2019

PDOP Reading: 2.1

GPS Instrument Operator's Name: KYLE DALEY

FNL/FSL

FEL/FWL

\*\* If directional footage at Top of Prod. Zone

Dist: 470 feet

Direction: FNL

Dist: 1707 feet

Direction: FWL

Sec: 10

Twp: 4N

Rng: 63W

FNL/FSL

FEL/FWL

\*\* If directional footage at Bottom Hole

Dist: 471 feet

Direction: FSL

Dist: 1698 feet

Direction: FWL

Sec: 15

Twp: 4N

Rng: 63W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 05/28/2019

Date TD: 07/04/2019

Date Casing Set or D&amp;A: 07/06/2019

Rig Release Date: 08/06/2019 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 16462

TVD\*\* 6418

Plug Back Total Depth MD 16440

TVD\*\* 6418

Elevations GR 4597

KB 4618

Digital Copies of ALL Logs must be Attached per Rule 308A

☒

List Electric Logs Run:

CBL, Mud Log, MWD/LWD, RES on API 05-123-46619

**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	26	16	43	0	80	400	0	80	VISU
SURF	13+1/2	9+5/8	36	0	1,543	470	0	1,543	VISU
1ST	8+1/2	5+1/2	20	0	16,444	1,975	5,770	16,444	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	3,354		NO	NO	
SUSSEX	4,053		NO	NO	
SHANNON	4,874		NO	NO	
SHARON SPRINGS	6,200		NO	NO	
NIOBRARA	6,423		NO	NO	

Operator Comments:

Per Form 2 BMP "No open-hole logs were run": RES on API 05-123-46619, 70 RANCH 10-8-2L.

The given TPZ is based upon the planned Top Perf. Depth. The given BHL is the actual BHL but will change if closer than 470' FSL. Actual TPZ &amp; BHL footages will be supplied on the Form 5A Completed Interval Reports.

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

Signed: \_\_\_\_\_ Print Name: PAUL GOTTLÖB

Title: Regulatory &amp; Engin. Tech. Date: \_\_\_\_\_ Email: paul.gottlob@iptenergyservices.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
402150611	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
402151624	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"/>
<u>Other Attachments</u>					
402145089	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402145090	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402145091	LAS-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402151623	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402151630	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402151631	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402160798	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402160799	PDF-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)

