

FORM  
5Rev  
10/14

## State of Colorado

## Oil and Gas Conservation Commission

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



Document Number:

401983952

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: 10110

Contact Name: Renee Kendrick

Name of Operator: GREAT WESTERN OPERATING COMPANY LLC

Phone: (720) 595-2114

Address: 1001 17TH STREET #2000

Fax:

City: DENVER

State: CO

Zip: 80202

Email: rkendrick@gwogco.com

API Number 05-001-10255-00

County: ADAMS

Well Name: Schaefer LD

Well Number: 13-032HN

Location: QtrQtr: SWSE Section: 24 Township: 1S Range: 67W Meridian: 6  
FNL/FSL FEL/FWL

Footage at surface: Distance: 364 feet Direction: FSL Distance: 1950 feet Direction: FEL  
As Drilled Latitude: 39.944320 As Drilled Longitude: -104.834786

GPS Data:

Date of Measurement: 12/21/2018 PDOP Reading: 1.2 GPS Instrument Operator's Name: CHAD MEIERS  
FNL/FSL FEL/FWL

\*\* If directional footage at Top of Prod. Zone Dist: 505 feet Direction: FSL Dist: 2359 feet Direction: FEL  
Sec: 24 Twp: 1S Rng: 67W

\*\* If directional footage at Bottom Hole Dist: 236 feet Direction: FNL Dist: 2376 feet Direction: FEL  
Sec: 13 Twp: 1S Rng: 67W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 12/08/2018 Date TD: 02/15/2019 Date Casing Set or D&amp;A: 02/16/2019

Rig Release Date: 02/24/2019 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 18011 TVD\*\* 7499 Plug Back Total Depth MD 18000 TVD\*\* 7499

Elevations GR 5021 KB 5041

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

List Electric Logs Run:

Mud, MWD/LWD, CBL (Resistivity in 001-09858)

## 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	1,788	650	193	1,788	VISU
1ST	8+1/2	5+1/2	17	0	18,011	2,340	3,040	18,011	CBL

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 12/11/2018

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
1 INCH	SURF	193	141	0	193

Details of work:

Top out job

## 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	4,502	4,664	NO	NO	
SUSSEX	4,863	5,083	NO	NO	
SHANNON	5,576	5,760	NO	NO	
SHARON SPRINGS	7,419		NO	NO	
NIOBRARA	7,564		NO	NO	

Operator Comments:

This well was drilled during the second rig occupation on the Schaefer LD Pad.

No open-hole logs were run; Open-hole resistivity log was run on the Schaefer 2536-1-4HC, API No. 05-001-09858; Approved APD had BMP requiring one well on pad to be logged with an open hole resistivity log with gamma ray.

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

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

Print Name: Renee Kendrick

Title: Sr. Regulatory Analyst

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

Email: rkendrick@gwogco.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
401984001	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402039725	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>			
401983999	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401984220	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401984223	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401984227	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401984229	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401985375	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>
Permit	Returned to Draft: •Bulk Return Threshold has been exceeded. Form was not reviewed.	09/13/2019

Total: 1 comment(s)

