

FORM
5

Rev
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:

400491333

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: 69175 Contact Name: Cassie Gonzalez
Name of Operator: PDC ENERGY INC Phone: (303) 860-5800
Address: 1775 SHERMAN STREET - STE 3000 Fax: _____
City: DENVER State: CO Zip: 80203 Email: Cassie.Gonzalez@pdce.com

API Number 05-123-37128-00 County: WELD
Well Name: Thornton Well Number: 21K-443
Location: QtrQtr: NWSW Section: 21 Township: 7N Range: 66W Meridian: 6
FNL/FSL FEL/FWL
Footage at surface: Distance: 2376 feet Direction: FSL Distance: 1180 feet Direction: FWL
As Drilled Latitude: 40.559640 As Drilled Longitude: -104.788420

GPS Data:

Date of Measurement: 10/20/2013 PDOP Reading: 2.2 GPS Instrument Operator's Name: Holly L .Tracy
FNL/FSL FEL/FWL

** If directional footage at Top of Prod. Zone Dist: 2280 feet Direction: FSL Dist: 1083 feet Direction: FWL
Sec: 21 Twp: 7N Rng: 66W
FNL/FSL FEL/FWL

** If directional footage at Bottom Hole Dist: 2138 feet Direction: FNL Dist: 1131 feet Direction: FWL
Sec: 28 Twp: 7N Rng: 66W

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 07/26/2013 Date TD: 08/07/2013 Date Casing Set or D&A: 08/08/2013

Rig Release Date: 08/10/2013 Per Rule 308A.b.

Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 12433 TVD** 7443 Plug Back Total Depth MD 12426 TVD** 7443

Elevations GR 4963 KB 4978 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+3/4	9+5/8	36	0	938	840	0	938	VISU
1ST	8+3/4	7	26	0	7,891	645	1,450	7,891	CBL
1ST LINER	6+1/8	4+1/2	13.5	7762	12,430				

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	3,912				
SUSSEX	4,458				
SHANNON	5,219				
SHARON SPRINGS	7,142				
NIOBRARA	7,233				
FORT HAYS	7,968				
CODELL	8,146				

Operator Comments:

Spud date is correct on Form 5 and incorrect on COGCC's website.
No open hole logs were run on this pad. APD was approved with no logging BMPs or exceptions.
Well was drilled before November 2015 therefore no CBL .las is required.
Corrections made on CBL by operator due to vendor losing large database files in a truck fire.
TOC comments from our Engineer: 7" TOC, 11.2 lead with dropping amps in this area.

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 ?	
<u>Attachment Checklist</u>			
402134070	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402134068	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>			
402133958	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402133962	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402134095	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402141368	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Return to draft for AOC settlement.	09/06/2016
Permit	Date casing set is before date TD. Directional data is in wrong format. Asked operator to correct. Codell perfs on 5A are aboe the Codell top. WO confirmation of tops. Footages ok. Otherwise, ready to pass.	04/25/2014

Total: 2 comment(s)

